Policy Directive

Tab D



Recruitment and Selection of Staff to the NSW Health Service

Summary The Policy Directive outlines the mandatory standards to be applied when recruiting and

selecting staff for employment in the NSW Health Service. Module One applies to the recruitment and selection of all staff. Module Two outlines additional or differing

standards for staff specialists and clinical academics.

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Institute, Chief Executive Governed Statutory Health Corporations, Community Health Centres, Dental Schools and Clinics, Local Health Districts, NSW Ambulance Service, NSW Health Pathology, Public Health System Support Division, Public Health Units, Public

Hospitals, Specialty Network Governed Statutory Health Corporations

Distributed to Divisions of General Practice, Health Associations Unions, Ministry of Health, NSW

Ambulance Service, Public Health System, Tertiary Education Institutes

Audience Staff undertaking recruitment and selection actions or participating on a selection panel



RECRUITMENT AND SELECTION OF STAFF TO THE NSW HEALTH SERVICE

PURPOSE

This Policy Directive outlines the mandatory requirements for recruiting and selecting staff for employment in the NSW Health Service.

Meeting the mandatory requirements will ensure that:

- all appointees have the appropriate knowledge, skills, qualifications, competence, and professional registration as required
- each appointee is a fit and proper person to work in NSW Health
- service delivery needs can be met in a timely manner.

MANDATORY REQUIREMENTS

The mandatory requirements outlined in this policy directive are built on the principles of:

- merit selection ie selecting the best possible person for the job
- identification, assessment and management of any employment related risks
- fairness, impartiality, accountability, efficiency and effectiveness.

The new Human Capital Management Recruitment and Onboarding system (referred to in the policy directive as StaffLink Recruitment) supports line managers, selection panel members, HR and Recruitment Units and any other staff involved in recruitment and selection processes in meeting the policy requirements.

The mandatory requirements are arranged in the form of Modules, which are attached as procedures to this policy statement.

The primary module, **Module One**, outlines the minimum requirements for <u>all</u> recruitment and selection of staff to the NSW Health Service, unless otherwise specified.

Module Two outlines additional or modified requirements for the recruitment and selection of staff specialists and clinical academics.

The mandatory requirements for Junior Medical Officer (JMO) annual recruitment campaigns and ad hoc recruitment will be contained in a separate policy directive until JMO recruitment migrates to StaffLink Recruitment.

The modules are supported by a number of additional tools attached as appendices. The modules refer to the relevant appendices as appropriate.

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IMPLEMENTATION

Chief Executives are required to:

- ensure that the requirements set out in this Policy Directive and the attached modules are communicated to all managers and staff advising on or taking part in recruitment, selection and employment processes
- identify the lowest level at which recruitment and selection decisions can be made, include the appropriate delegations in their Health organisation's delegations manual and ensure the delegations are applied consistently
- ensure managers have the appropriate skills to exercise delegated recruitment and selection accountabilities
- lead by example ensuring they only approve appointments where merit selection and all other relevant mandatory requirements have been met.

Directors of Workforce/Human Resources/Medical Services are required to:

- promote and support the mandatory recruitment and selection requirements
- ensure provision of instruction, information and training as necessary to support effective implementation of the requirements
- monitor compliance with the mandatory requirements and ensure all the required checking and screening actions occur
- assume responsibility for the medical recruitment function.

Convenors of selection panels are required to:

- ensure all relevant mandatory recruitment and selection requirements are followed and appropriately documented
- ensure they have completed recruitment and selection training.

All staff are required to:

• comply with all relevant mandatory recruitment and selection requirements.

REVISION HISTORY

Version	Approved by	Amendment notes
November 2017 (PD2017_040)	Approved by Deputy Secretary, People, Culture and Governance	 Reviewed policy and rescinded PD2015_026. The revised policy: Allows for staged collection of information from applicants. Provides for multiple assessment and culling stages throughout the selection process. Allows culled applicants to be advised of their status without delay. Allows the convenor and selection panel to focus on merit selection with checks and verifications done separately by HR/Recruitment Units. Allows the convenor to operate on behalf of the selection panel online, be responsible for the initial cull and make an overriding recommendation (where the panel disagrees on the selection recommendation).

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		 Removes the requirement to undertake referee checks on applicants before placing them on an eligibility list. Provides for probation periods of up to 3 months for new staff to the NSW Health Service. Provides for state-wide Recruitment Pools, facilitated through StaffLink Recruitment. More clearly reflects the NSW Government's diversity focus.
July 2015 (PD2015_026)	Deputy Secretary, Governance, Workforce and Corporate	Updated policy and rescinded PD2012_028.
May 2012 (PD2012_028)	Deputy Director- General, Governance, Workforce and Corporate	 Updated policy and rescinded PD2011_032. Provided clearer advice on walk-in applicants (Mod 1) Updated advice on approval to engage recruitment companies (Mod 1) Clarified information about Australian citizenship/residency considerations (Mod 2) Amended the term 'scope of practice' in Module two to read 'scope of clinical practice' (Mod 2) Included need to nominate Delegated Authorising Officer for the Junior Medical Officer annual recruitment (Mod 4) Included approved governance arrangements -centralised recruitment panels (Mod 4) Included approved allocation process for NSW Health Trainees not in networked positions (Mod 4)
June 2011 (PD2011_032)	Deputy Director- General, Health System Support	 Updated policy and rescinded PD2011_012 and PD2010_041. Added Module 4 for Junior Medical Officer annual recruitment Removed requirement to copy 100 points of identification Prohibited 3rd party applications Clarified the employment of temporary visa holders Amended convenor's checklist (M1) and compliance declaration (M2) to include confirmation that service check advised at interview and that Pharmaceutical Services Branch are contacted to confirm conditions re drugs of addiction.
February 2011 (PD2011_012)	Deputy Director- General, Health System Support	Updated policy and rescinded PD2008_045, PD2006_059, PD2005_500 and PD2005_326
July 2006 (PD2006_059)	Deputy Director- General, Health System Support	Updated policy.

ATTACHMENTS

1. Recruitment and Selection of Staff to the NSW Health Service: Procedures

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MODULE ONE

1 BACKGROUND

1.1 About Module One

Module One of this policy directive is the primary source of mandatory requirements for all recruitment and selection for employment in the NSW Health Service.

The requirements outlined in Module One apply to filling any vacancy, **except for**:

- Casual employment, which refers to persons who may be engaged on an hourly basis, for a period which does not extend beyond one week, to provide services related to unexpected staff absences or unanticipated peak demands, with no expectation of continued employment beyond the provision of the services required at the time
- Temporary employment for a period not exceeding 13 weeks
- NSW Health Service Senior Executive appointments
- Junior Medical Officer recruitment, which is covered by a separate policy directive
- Where the requirements of this Module differ from those contained in a relevant additional Module. If this is the case it will be noted at the relevant point in Module One.

<u>Note</u>: For casual and short-term temporary employment, Health organisations must still assess the suitability of a candidate and carry out any mandatory checks and verifications required by the position before making any offer of employment (see *Appendix 1.1*).

1.2 Relationship to other modules

In addition to or instead of the requirements specified in Module One, certain professional groups must meet **additional**, **modified or differing requirements** as outlined in relevant additional Modules. Where this is the case, appropriate references will be made from Module One.

1.3 Legislative, industrial and policy framework

1.3.1 Relationship to legislation

The Health Services Act 1997 provides for employment of staff to the NSW Health Service.

The recruitment provisions of the Government Sector Employment (GSE) legislation generally do <u>not</u> apply to the NSW Health Service. However, <u>GSE Rule 26 Employment of eligible</u> <u>persons</u>, and <u>GSE Rules 28-31 and 34 Transfers and secondments</u>, do apply. This policy makes reference and provides links to these where relevant.

The <u>NSW Anti-Discrimination Act 1977</u> underpins all recruitment and employment decisions in the NSW Government Sector, including the NSW Health Service. The Act makes it unlawful to discriminate against applicants and employees on the basis of their sex, race, ethnic or ethnoreligious background, marital status, pregnancy, disability, age, homosexuality, transgender or carers' responsibilities. This includes decisions about who will be offered employment, how this is determined, and on what terms employment is offered.



1.3.2 Relationship to industrial awards

When filling vacancies, Health organisations must consider the applicable industrial award or determination. Should requirements of this or another Module differ from the conditions set out in the relevant award or determination, the award / determination conditions will take precedence.

All NSW Health awards and determinations are available on the Internet at http://www.health.nsw.gov.au/careers/conditions/Pages/default.aspx.

Special attention should be paid to Clause 53 (Reasonable Workloads for Nurses) of the <u>Public Health System Nurses' and Midwives' (State) Award</u>, which requires NSW Health to allocate reasonable workloads to nurses. Health organisations must ensure their recruitment processes continue to comply with that obligation.

1.3.3 Relationship to other policies

Health organisations will need to consider a small number of other key, subject specific policies (as amended from time to time) alongside this policy directive. This policy makes reference and provides links to other policies where relevant.

All NSW Health policy directives are available on the Internet at http://www.health.nsw.gov.au/policies/Pages/default.aspx. In addition, the Recruitment section of the NSW Health HR e-compendium contains links to all recruitment related policies that apply to the NSW Health Service, including government sector wide policies.

1.4 StaffLink Recruitment and Onboarding system

The StaffLink Recruitment and Onboarding system (which will be referred to as "StaffLink Recruitment" throughout this policy) supports managers and recruitment units / human resources areas in conducting recruitment and selection actions efficiently and in line with policy requirements. A number of standard tools and templates have been developed for use across the NSW Health Service. These are available through StaffLink Recruitment and will be referenced within the relevant sections of this policy directive.

Staff specialist recruitment – where senior medical and dental recruitment has not yet migrated to StaffLink Recruitment, these references do not apply.

1.5 Workforce targets

1.5.1 Health Service Level Agreement KPIs

The <u>NSW Public Sector Aboriginal Employment Strategy</u> sets an aspirational target of at least 1.8% of Aboriginal employees in each of the sector's salary bands by 2021. This target has been included as a KPI in the NSW Health Service Agreements. The public sector strategy is embedded in the <u>Good Health – Great Jobs Aboriginal Workforce Strategic Framework</u> (<u>PD2016_053</u>), and the NSW Health KPI is underpinned by the <u>Respecting the Difference: An Aboriginal Cultural Training Framework for NSW Health (PD2011_069)</u>.

Under NSW Health Service Agreements, Chief Executives must also achieve an average of 10 business days for the time taken to approve/decline/defer standard requests to fill a vacancy.

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1.5.2 NSW Government Sector diversity

The Premier has set senior leadership diversity targets for the NSW government sector as follows:

- Double the number of Aboriginal and Torres Strait Islander people in senior leadership roles by 2025
- Increase the proportion of women in senior leadership roles to 50% in the government sector by 2025.

Note: Senior leadership roles refer to managerial / supervisory roles with a base salary greater than \$146,499 per annum.

Each Health organisation will have their individual targets to support the achievement of these sector wide targets.

Other government priority areas include people with a disability and refugees resettling to NSW.

1.6 Definitions

NSW Health organisation: For the purposes of this policy directive, any public health organisation as defined under the <u>Health Services Act 1997</u>, NSW Ambulance Service, Health Infrastructure, HealthShare NSW, NSW Health Pathology, any other administrative unit of the Health Administration Corporation, and Albury-Wodonga Health, in respect of staff who are employed in the NSW Health Service.

NSW Health Service: All persons employed under Chapter 9, Part 1 of the <u>Health Services</u> Act 1997.

NSW Government Sector: Comprises the Public Service, the Teaching Service, the NSW Police Force, the NSW Health Service, the Transport Service of NSW, any other service of the Crown (including the service of any NSW government agency), and the service of any other person or body constituted by or under an Act or exercising public functions (such as a State owned corporation) prescribed by the <u>Government Sector Employment Regulation</u> for the purposes of any relevant parts of the Government Sector Employment legislation.

Staff specialist recruitment – see <u>also</u> <u>Section 1.6 of Module Two</u> for additional relevant definitions.

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2 RECRUITMENT AND SELECTION REQUIREMENTS

2.1 Identifying and managing vacancies

All managers must be actively aware of the staffing situation and vacancies within the workforce teams under their responsibility. Where they identify an upcoming vacancy, they need to assess the ongoing need for the position without delay, and start any appropriate action to fill it immediately to ensure service delivery is not adversely affected.

Appendix 1.2 provides further guidance on identifying and managing vacancies.

<u>Appendix 1.3</u> sets out general timeframes for the recruitment and selection process (but these may vary in bulk recruitment) and includes strategies to speed up the process.

2.2 Review position information

Health organisations must review all position information related to a vacancy to ensure it is accurate and up-to-date. Adequate position information will ensure that applicants are provided with essential information about the vacancy, and that the selection process is robust and relevant to the vacancy.

<u>Note</u>: Position information review also provides an opportunity to consider any workforce diversity needs. Refer to <u>Section 1.5</u> regarding workforce targets, and <u>Appendix 1.7</u> on Aboriginal employment, and <u>Appendix 1.8</u> on employment of people with a disability.

Position information requirements, as outlined in <u>Appendix 1.4</u>, have been built into StaffLink Recruitment, and include a position/role description and selection criteria (see below).

2.2.1 Position / role description

A position / role description outlines the purpose, key accountabilities and relationships, and core requirements of a position/role. In addition to recruitment, they are an effective tool for workforce planning and form the basis for the development of staff performance agreements.

All position / role descriptions must follow the state-wide standard template, which outlines what information must be included. A Position Description Writer Tool and Guidelines are available through StaffLink Recruitment to provide guidance on how to write new position/role descriptions and submit them for use in StaffLink Recruitment.

All positions must be appropriately classified and graded (refer to the requirements of the relevant Award or, where the Award does not provide sufficient guidance, to appropriate job evaluation methods).

Staff specialist recruitment – see also <u>Section 2.2.1 of Module Two</u>.

2.2.2 Selection criteria

Health organisations must use selection criteria to assess the suitability and relative merit of all applicants for the position (see <u>Section 2.8</u> regarding the merit selection process).

The selection criteria outline the minimum skills, knowledge, experience and other attributes required to perform the inherent requirements of the position. Any selection criteria developed must be clear and concise, directly relate to the position, and reflect any relevant Award



requirements. <u>Appendix 1.5</u> outlines more detailed requirements and considerations for developing selection criteria.

Health organisations must review any existing selection criteria each time they wish to fill a vacancy to ensure the criteria accurately reflect the requirements of the current fill event.

2.3 Options for filling vacancies

Depending on the nature of the position and the length of the vacancy, Health organisations may have a number of options available to them to fill the vacancy. The table attached at Appendix 1.6 will assist in identifying the different options and outlines related legislative and / or policy requirements. Health organisations must also consider any applicable provisions under Health industrial instruments.

Before considering any other fill option, Health organisations:

- must explore the possibility of redeploying any injured or excess / affected staff to the vacancy
 - <u>Note</u>: Priority candidates may also be identified where Government Sector services / functions transfer to the Non-Government Sector for further information, see <u>Premier's Memorandum 2016-02</u>.
- for nursing positions, may also need to consider an increase in hours for an existing permanent part-time incumbent (including conversion to full-time status) and / or conversion of the employment of an existing casual incumbent to permanent appointment in line with the *Public Health System Nurses' and Midwives' (State) Award*.

Health organisations should also consider any workforce diversity needs / targets at this point, as some specific fill options exist to facilitate employment of disadvantaged groups. (See <u>Appendix 1.6</u> for more detailed information).

Some of the fill options do not require the vacancy to be advertised. However, in all instances, Health organisations must assess the suitability of any candidate to perform the required duties, and complete, or confirm as current, all mandatory checks and verifications for the position before any offer of employment (see *Appendix 1.11*).

Staff specialist recruitment – see also Section 2.3 of Module Two.

2.4 Advertising requirements

Where a Health organisation has not been able to redeploy an injured or excess/affected staff member to the vacancy, and unless another fill option is more appropriate (see <u>Appendix 1.6</u>), it must open the vacancy to competitive merit selection and advertise it. All vacancies must be advertised through the NSW Health Career Portal as a minimum.

When determining the advertising scope and media. Health organisations must:

 ensure that the scope and media are relevant and appropriate for the position and the field of potential candidates (refer also to <u>Appendix 1.6</u> regarding source of applicants for different fill options).

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<u>Note</u>: Health organisations should also consider whether a brief reference should appear in the appropriate print media referring potential applicants to additional information online.

- as a general rule, advertise a position across NSW Health as a minimum, if it has a salary
 equivalent to or higher than Health Manager Level 4, and if it is to be filled permanently or
 temporarily for 12 months or more
- carefully consider the cost of any print media advertising
- consider whether information about vacancies can also be shared with professional or other talent communities in other ways (eg professional or social network services, universities, word of mouth etc).

<u>Note</u>: Regardless of how applicants become aware of a vacancy, every applicant must be referred to the same information about the vacancy, and be assessed against the same selection criteria. See also <u>Section 2.8.2</u> regarding selection methods.

Advertisements must provide key information about the position / role to attract and inform potential applicants, and include links to a full position / role description and any other relevant information (see <u>Section 2.5</u> Information to be provided to applicants). They must also include contact details for further information and a closing date (unless approved as a rolling advertisement – see below).

Note: Advertisements must meet any specific legislative or Award requirements (eg security industry legislative requirement to list master licence number for security positions; reference to relevant legislation for advertisements targeted to 'eligible persons' under the <u>Government Sector Employment Rule 26</u>, or a particular EEO group under the <u>NSW Anti-Discrimination Act</u> 1977).

<u>Note</u>: Advertisements for permanent positions may, at the NSW Health organisation's discretion, indicate that applicants holding visas with working rights may be considered for temporary appointment (up to the expiry date of their visa) where no suitable applicant for permanent appointment is identified (see also <u>Section 2.10.2</u> regarding citizenship/residency considerations).

Health organisations may consider using rolling or ongoing advertisements for positions in high demand (eg nursing staff) to facilitate speedy assessment of any potential candidate. Such advertisements need not have a closing date, but their ongoing need and selection criteria must be reviewed regularly.

Staff specialist recruitment – see also Section 2.4 of Module Two.

2.5 Information to be provided to applicants

In addition to information contained in the advertisement, potential applicants must have access to:

- the full position/role description and selection criteria (refer to <u>Section 2.2</u> of this Module)
- up-to-date information about the NSW Health recruitment and selection process and requirements in line with *Appendix 1.9*
- a link to the current NSW Health Code of Conduct.

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Note: The above information can be made available to applicants on the NSW Health Career Portal.

At relevant stages of the selection process, applicants must be reminded of the relevant position and process requirements, and any supporting information/documentation they are required to provide at that stage.

Staff specialist recruitment – see <u>also Section 2.5 of Module Two</u>.

2.6 Application management

The convenor has the discretion to accept late applications where a reasonable explanation has been provided (eg job website unavailable) and / or an extension requested prior to the closing date. A grace period of 24 hours would normally be allowed. Unless there are exceptional circumstances, late applications must not be accepted after interviews have started.

Any decision must be applied fairly to all late applications, and reasons clearly documented. If the selection process is delayed or does not go ahead, all applicants must be advised of this.

Staff specialist recruitment – see also Section 2.6 of Module Two.

2.7 Selection panels

Selection processes in NSW Health usually include establishing a selection panel to undertake a comparative merit assessment of all applicants for the position, and make recommendations regarding the preferred applicant(s) and any applicants to be placed on an eligibility list.

See Section 2.7.1 regarding the required composition of the panel.

At a minimum, the convenor of the panel must have completed selection training or refresher training in the last 3 years. All panel members who are staff of the NSW Health Service must have completed the full Respecting the Difference training. Panel members external to Health should be asked to complete the online component at a minimum.

All panel members must declare any real or potential conflict of interest as soon as they become aware of it (eg close personal relationship or previous workplace conflict with an applicant). Any conflict of interest must be managed as necessary by the convenor and documented as part of the Recommendation Report (see <u>Section 2.9.1</u>). Options may include:

- Adding an additional panel member as a safeguard eg two independents
- Limiting the contribution of the panel member eg contribute to discussion only as a subject expert, but not take part in decision-making
- Replacing the panel member.

<u>Note</u>: For further guidance on declaring and managing conflicts of interest refer to the current NSW Health policy on *conflicts of interest and gifts and benefits*.

Note: Where a panel member is a nominated referee for one of the applicants (eg they may be the applicant's current supervisor), they should declare this relationship as soon as possible. In

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these instances, it is recommended that the panel seeks an additional relevant referee check, where possible. In addition, all other referee checks should be done by more than one panel member.

<u>Note</u>: If a panel member arranges for someone else to participate on the panel on their behalf, the original panel member is considered to have withdrawn from the panel and should take no further part in its proceedings. The newly delegated panel member takes over all the responsibilities and authority of a panel member.

2.7.1 Selection panel composition

The size and membership of the panel will vary depending on the scope and nature of the position to be filled. However, unless otherwise specified in any additional Module, the following requirements must be met:

- As a minimum, the panel must have two members, one of whom is the designated convenor (refer to <u>Section 2.7.2</u> Role of the convenor) and one an 'independent' (refer to <u>Section 2.7.3</u> Role of the independent).
- At least one member of the panel must have enough knowledge of the position requirements to be able to effectively assess applications.
- The panel must have at least one male and one female member, wherever possible.
- The convenor and the independent should, as far as practicable, hold positions that are
 more senior than the position being filled. Any additional panel members should be at
 least at the same level as the position being recruited to.
- Panels for identified and targeted positions must include appropriate representation from those groups (eg a panel for a position targeted to Aboriginal people must include at least one Aboriginal person).
- Where the position or the background of the applicants requires an understanding of a particular community or EEO group, the membership of the panel should reflect this.
- Any position-specific NSW Health, legal or industrial requirements must be met eg a selection panels for Heads of Internal Audit must include a Ministry representative.
- Where, as a predetermined structured program, the successful applicant could be placed in, or rotate between, a number of facilities / Health organisations, these facilities / Health organisations should be represented on the panel.

<u>Note</u>: Facilities can be delegated to represent other facilities on the panel (eg where the panel would otherwise become too large).

Health organisations should consider including additional expertise on panels where:

- Positions manage areas of significant risk
- Positions require a high degree of technical or professional competence
- Appointments have proved contentious in the past
- The selection process is a result of complaints about the original process.

Staff specialist recruitment – see also Section 2.7.1 of Module Two.

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2.7.2 Role of the convenor

The convenor is responsible for:

- Managing the merit selection process, collating input from panel members and, if so agreed by the panel, recording all outcomes of the process on behalf of the entire panel in StaffLink Recruitment
 - Note: The convenor may also instruct a central recruitment unit to record the outcomes.
- Making final recommendations (but noting any alternative views in the recommendation report) (see <u>Section 2.9</u>)
- Ensuring that the selection process meets all relevant legislative, industrial and NSW Health policy requirements (refer to <u>Section 1.3</u>)
- Ensuring that the panel considers all relevant material in making a recommendation
- Resolving any conflicts of interest appropriately (see <u>Section 2.7</u>).

Staff specialist recruitment – see Section 2.7.2 of Module Two instead.

2.7.3 Role of the independent

The independent panel member is responsible for ensuring that the selection process is fair, and that decisions are based solely on the available material. Therefore, they must:

- Have no direct interest in the outcome of the selection process
- Be from either a different administrative branch or business unit (ie different reporting line)
 or different NSW Health organisation or external to NSW Health
- Be unlikely to be unduly influenced by other panel members.

2.8 Selection process

The position / role description, advertisement, selection criteria and all applications and assessment information must be available to all panel members.

Applicants must be assessed in a fair and consistent manner, with a common understanding among panel members of the standard required.

<u>Note</u>: Where applicants include injured or excess / affected staff, such staff are entitled to priority assessment before any other applicants as outlined in <u>Appendix 1.6</u>.

Note: Where the position is targeted to 'eligible persons' under the <u>Government Sector Employment Rule 26</u>, the recruitment and selection process (except any process steps required by law) may be modified as necessary to take into account particular barriers to employment for the specific 'eligible person' group (eg a refugee applicant may not be able to provide a current supervisor referee, and the panel may need to consider alternative referees).

The convenor / panel must document any selection decisions made throughout the process, and reasons for them.

Staff specialist recruitment – see also Section 2.8 of Module Two.

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2.8.1 The initial cull

The initial cull usually involves a review of each applicant's curriculum vitae and an assessment of their written application against the selection criteria of the position. In some instances other methods may also be used as an initial cull (such as assessment centres or psychometric testing). Where a large number of applicants appear to meet the selection criteria, further comparative assessment of their applications against the criteria may take place.

<u>Note</u>: Application forms can be set up as a combination of quantifiable and qualitative (targeted) questions that directly relate to the selection criteria of the position. They do not need to include a question about each selection criterion (but further assessment methods for short-listed candidates must then target the remaining selection criteria – see <u>Section 2.8.2</u>). Where any quantifiable questions have been set, StaffLink Recruitment will automatically rank candidates based on those questions to assist panels in identifying the top candidates for further assessment.

<u>Note</u>: In some instances, residency status may be a consideration when culling applicants. See <u>Section 2.10.2</u> regarding Australian citizenship and residency considerations.

<u>Note</u>: Where applicants include affected or excess staff with priority status, these applicants are entitled to priority assessment before any other applicants. Refer to the current NSW Health policy on *managing excess staff*.

All panel members must agree on the applicants to be culled (if an agreement can't be reached, the Convenor may make the final decision, but must note any alternative view(s) in the Recommendation Report). The reasons for culling an applicant must be documented on Staff Link Recruitment.

Note: See Section 2.13 regarding providing timely advice to unsuccessful applicants.

Staff specialist recruitment – see also Section 2.8.1 of Module Two.

2.8.2 Further assessment of shortlisted applicants

Methods for further assessing the remaining applicants will vary depending on the nature and level of the position.

The assessment methods used must be specifically targeted to the selection criteria and the position / role description of the vacant position, but each method may target particular selection criteria. While the same methods must be used to assess each applicant for the vacancy, they should be applied in a flexible manner without affecting their validity. In particular, any assessment method must not unfairly disadvantage applicants who have a disability or are from a particular cultural or community group.

<u>Note</u>: For further information about employment of people with a disability, refer to <u>Appendix</u> <u>1.8</u>.

Possible assessment methods include, but are not limited to:

- Formal interviews with direct contact with the applicant (see <u>Section 2.8.3</u> for further information)
- Pre-screening interviews (ie short structured phone interviews to further shortlist applicants to be called for formal face-to-face interviews)

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- Work samples or tests or other skills assessment
- Applicant presentations
- Group exercises or role plays
- Online interviews / assessments
- Third party assessments including cognitive or personality assessments.

The full panel must consider the outcomes of all assessments prior to making any selection decisions, including assessments that were not executed by the full panel (eg third party assessments).

Note: All selection panel members should take part in formal interviews (see Section 2.8.3).

The sequence of assessments is at the discretion of the panel. It is recommended that all assessment outcomes are recorded online in StaffLink Recruitment to facilitate reporting and talent management.

Applicants must be provided with at least three days' notice of any assessment (unless it is mutually convenient to schedule assessments sooner), and provided with information about the assessment methods, the time they will require, the names and titles of the selection panel members, and any documentation they may need to bring to an interview.

The identity of the applicant must be confirmed at interview / other further assessment (eg photo ID).

<u>Note</u>: If it is not possible to confirm the identity of an applicant in person (eg interstate / overseas applicant), and if the applicant becomes the successful applicant, the employing Health organisation must confirm their identity before they commence work with NSW Health.

Staff specialist recruitment – see also Section 2.8.2 of Module Two.

2.8.3 Formal interviews

NSW Health recruitment and selection processes usually include a formal interview involving direct contact with applicants either face-to-face or via an interactive visual medium (eg videoconference / Skype).

<u>Note</u>: Direct contact allows for visual identification of the interviewee. Telephone interviews should only be utilised in the limited circumstances where there are no other options available to the panel.

All selection panel members should take part in the interviews. If this is not possible, there must always be a minimum of two people conducting any interview, unless otherwise specified in any additional Module.

Interview questions must be clear, unambiguous and directly relate to the selection criteria and position / role description.

The panel should ask a common set of initial questions of all applicants. It may also need to ask follow-up questions exploring issues raised by the applicant or eliciting further information.

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Where an applicant's work history contains blank periods, the panel should explore these further at the interview. Supporting documentation may be required in some instances and any issues should be followed up in referee checks.

It is recommended that interview outcomes are recorded online in StaffLink Recruitment to facilitate reporting and talent management.

Staff specialist recruitment – see also Section 2.8.3 of Module Two.

2.8.4 Determine preferred applicant(s) and any eligibility list

Once the assessments have been completed, the full panel must analyse all resulting information and identify the preferred applicant(s) for the position, including an eligibility list if applicable.

2.8.4.1 Preferred applicant(s)

The preferred applicant is the applicant who is considered the most suitable person for the job, based on a comparative assessment of all applicants' abilities, knowledge, skills, experience and qualifications (where required) against the selection criteria.

Referee checks must be conducted on the preferred applicant(s) before the selection panel can finalise their recommendation (see Section 2.8.5 Referee checks).

The panel may conduct any other appropriate enquiries about the preferred applicant in order to inform their decision-making, including with any NSW Health organisation where the applicant currently holds or previously held employment. These other enquiries must be documented.

<u>Note</u>: Once the panel recommends an applicant for employment, a number of further relevant mandatory checks and verifications, and any related risk assessments, must also take place before an offer of employment can be made – see <u>Section 2.10</u>.

Staff specialist recruitment – see <u>also</u> <u>Section 2.8.6 of Module Two</u> on determining clinical privileges / scope of practice.

2.8.4.2 Eligibility lists

As part of the selection process, the panel should consider creating an eligibility list, particularly where positions have proved difficult to fill, or there is a high turnover or high demand for a particular occupational group. Any eligibility list must be submitted for approval as part of the recommendation.

An eligibility list may include one or more applicants who were not the preferred applicant, but who the selection panel also deemed highly suitable for the position. These other suitable applicants must be ranked in order of merit.

<u>Note</u>: In order to effectively support speedy recruitment processes, eligibility lists should not include all unsuccessful applicants, even when they are deemed suitable for the position, but list the most meritorious candidates only. This will also ensure that any Recruitment Pool created only includes high quality candidates (refer to <u>Section 2.13</u> and <u>Appendix 1.6</u> for further information about Recruitment Pools).

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Referee checks are not required prior to placing applicants on an eligibility list. However, where the eligibility list is activated either in the same or a different recruitment process, referee checks and all other mandatory checks and verifications must be conducted, or confirmed as current, on the next ranked candidate prior to making an offer of employment.

Eligibility lists are current for up to 12 months, unless otherwise provided by the relevant award.

2.8.5 Referee checks

Prior to finalising a selection recommendation, referee checks must be conducted on the preferred applicant(s).

<u>Note</u>: While referee checks are not required to place an applicant on an eligibility list, in some instances they nevertheless need to be conducted on multiple applicants to determine which of them will be recommended for employment.

The purpose of referee checks is to:

- Seek specific information about the current knowledge, skills, competence and experience
 of the applicant as they relate to the selection criteria / position
- Confirm any significant claims made by the applicant in relation to the position
- Seek information about recent past performance, professional conduct and attendance record of the applicant
- Explore any issues or concerns related to the skills, competence and experience identified during the application or assessment / interview process.

A mandatory minimum set of questions must be asked of referees in line with <u>Appendix 1.10</u>, and outcomes recorded in StaffLink Recruitment.

The person conducting the referee checks must have a good understanding of what information is required and be competent in exploring issues further (including clinical issues where relevant) and interpreting responses.

At least two referee checks must be conducted, except where:

- This requirement differs from that in any relevant additional module, or
- The selection panel has been able to satisfy itself through a single referee check that the preferred applicant is the most appropriate candidate for the position <u>and</u>
- The position is unskilled and
- The position has a low risk potential and
- All other verifications take place.

For graduate nurse positions, a minimum of one referee check must be conducted with a person who can provide employment related information about the applicant.

<u>Note</u>: Additional referee checks may be necessary where the selection panel is not fully satisfied with the results of the minimum checks, or wishes to explore additional issues. In these circumstances applicants must be asked to provide details of additional referees.

One of the referees must be a current supervisor/manager of the preferred applicant.



<u>Note</u>: Provision of a current supervisor / manager referee may not always be possible, eg if the applicant is a first time entry to the workforce, currently unemployed, or returning to the workforce after a break. In such situations, the selection panel should be flexible in determining the appropriateness of the nominated referees.

<u>Note</u>: Where an applicant refuses to nominate their current supervisor / manager (for example, there may be a grievance or complaint history between the applicant and their supervisor / manager), or where contact cannot be made with the current supervisor, the panel needs to be satisfied that it is still able to access enough relevant, up-to-date information to assess whether the applicant is the most appropriate person for the position. Depending on the circumstances, the selection panel may ask the applicant to provide alternative referee(s) eg a past supervisor / manager.

Note: See also <u>Section 2.7</u> regarding where a panel member is a referee for one of the applicants.

As far as practical, all referee checks must be conducted orally with each referee. Responses to each question must be recorded and maintained with the selection records, together with the full name of the referee, contact details, position and relationship to the applicant.

Written (including electronic) references may only be accepted where:

- Due to time differences and / or work commitments, detailed phone referee checks are difficult to arrange, or where it is difficult to understand referee responses because English is not their first language and
- Direct, verbal contact has been made with the referee, and their identity and relationship to the applicant have been confirmed.

For written references, questions in line with <u>Appendix 1.10</u> must be sent to the referee(s) with written responses to be returned to the person responsible within an agreed time.

<u>Note</u>: Where an agency from the Panel of Overseas Recruitment Agencies (PORA) manages referee checks, NSW Health organisations must review the referee reports, make direct contact with the referee to confirm their identity and relationship to the applicant, and further explore any matters arising from the information contained in the referee report, where necessary - refer to the current NSW Health policy directive on the <u>recruitment of overseas</u> health professionals using the PORA.

Referees must be advised that information obtained from them will be incorporated into the recommendation report and may therefore form part of the feedback provided to unsuccessful applicants.

Where the panel is unable to confirm relevant information via referee checks, it should not consider the applicant any further.

2.9 Make recommendations

Staff specialist recruitment – see <u>Section 2.9 of Module Two instead</u>.

2.9.1 Recommendation report

Once referee checks have been completed, the panel must provide a recommendation to the relevant decision maker using the online recommendation report in StaffLink Recruitment. All



panel members must have an opportunity to review the recommendation report and add any comments before it is submitted for approval.

Note: The recommendation report must also record any conflicts of interest declared and how they were managed.

The decision maker must have access to all relevant selection information (eg full application, referee reports etc). The recommendation report must include confirmation that the selection process was undertaken in line with the mandatory requirements of NSW Health policy, or clearly provide information on exceptions. The decision maker should also have access to all other applications if they so request.

Where none of the applicants have been assessed as suitable, a report must still be produced noting that there is no recommended applicant.

<u>Note</u>: In some instances, residency status of applicants may determine who can be recommended for employment. See <u>Section 2.10.2</u> regarding Australian citizenship and residency considerations.

The selection records should be able to be presented in a form that allows for review by a third party, if necessary, in the event of a dispute.

Staff specialist recruitment – see <u>Section 2.9.1 of Module Two instead</u>.

2.9.2 Alternative recommendations

If a selection panel is unable to reach a unanimous decision, the convenor is responsible for the final recommendation. However, the convenor must include information about any differing views in the recommendation report to be submitted to the decision maker.

Staff specialist recruitment – see Section 2.9.2 of Module Two instead.

2.9.3 Approving the recommendation

All recommendations require approval from an appropriately delegated decision maker. Such delegations should be made to the lowest possible operational level, as long as the decision maker meets the following criteria:

- They hold a position higher than the position being filled
- There is no conflict of interest in their role as the decision maker.

<u>Note</u>: For further guidance on conflicts of interest, refer to the current NSW Health policy on <u>conflicts of interest and gifts and benefits</u>.

<u>Note</u>: In some cases, the convenor of the selection panel may also be the delegated decision maker.

<u>Note</u>: In some cases, even where the above considerations have been met, the decision to appoint may have to be escalated to a higher level, eg where appointments to the position have proved contentious in the past, the position is high profile, or the selection process has recommenced as a result of a complaint about the original process.

The decision maker must be satisfied that the selection process has followed NSW Health policy and that the recommended applicant is the most meritorious for the position.



If the decision maker overturns the selection recommendation, this must be documented in a manner that clearly explains the decision making process and that can be reviewed and defended in the event of a complaint.

2.10 Mandatory checks and verifications and related assessments

Before any offer of employment Health organisations must verify all information provided by the recommended applicant and complete, or confirm as current, all mandatory employment checks relevant to the position, in line with relevant policies. See checklist at *Appendix 1.11*.

Note: See also <u>Section 2.10.1</u> regarding pre-employment health assessments and <u>Section 2.10.2</u> regarding citizenship/residency considerations.

<u>Note</u>: Recommended applicants can be advised that they have proceeded to the final stage of the selection process.

Health organisations must assess the outcomes of any checks and take any appropriate risk management action in line with relevant policies before any offer of employment. Where a risk assessment determines that the risk posed to the NSW Health organisation is significant, the Health organisation needs to determine whether to continue with the appointment.

Evidence that all relevant checks have been completed or confirmed as current, and any findings of significance must form part of the selection records.

Where a recommended applicant is going to rotate across facilities upon appointment, each individual facility needs to be aware of any conditions or restrictions relevant to the applicant (eg registration conditions or other risk management action deemed appropriate), and the facility's capacity to accommodate them. Any conditions must be documented and compliance monitored.

<u>Note</u>: In relation to medical practitioners, see also the current NSW Health policy on <u>medical</u> <u>practitioners' compliance with registration conditions</u>.

Staff specialist recruitment – see <u>Section 2.10 of Module Two</u> instead. See also <u>additional</u> Sections <u>2.10.3</u>, <u>2.10.4</u> and <u>2.10.5</u> of Module Two.

2.10.1 Health assessment

Health organisations must also conduct a health assessment of the recommended applicant before an offer of employment (unless already conducted). The health assessment must be based on the inherent requirements of the position.

At a minimum, the recommended applicant must complete a Health Declaration. In order to do this, they must have access to the job demands checklist for the position.

The Health Declaration and any other health assessments must be reviewed and assessed by an appropriately trained staff member.

<u>Note:</u> It is contrary to the <u>NSW Anti-Discrimination Act 1977</u> to check general health or exclude applicants on the basis of their health, or illness or disability not relevant to the demands of the job, or their past, future or presumed health, illness or disability.

<u>Note</u>: Frontline positions should be given priority when facilitating and reviewing health assessments.

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If the health assessment finds that a recommended applicant does not meet the inherent job requirements of the position because of disability/impairment, the <u>NSW Anti-Discrimination Act</u> 1977 requires that an employer consider if it can make reasonable adjustment to the position or the work environment to allow the applicant to carry out the inherent requirements of the position. Employers need not provide adjustments where to do so would cause them unjustifiable hardship.

For further information, refer to the NSW Government Sector policy on <u>employment health</u> <u>assessement</u>.

The recommended applicant's immunisation status must also be assessed by an appropriately trained staff member - refer to the current NSW Health policy <u>on occupational assessment</u>, <u>screening and vaccination against specified infectious diseases</u>.

2.10.2 Australian citizenship / residency considerations

Health organisations must verify citizenship / residency status and visa holders' working rights prior to any offer of employment (see also *Appendix 1.11* Mandatory checks and verifications).

To be eligible for permanent appointment to a position in NSW Health, an applicant must have Australian citizenship or permanent Australian residency. Therefore, where a position is to be filled on a permanent basis, applicants must provide proof of either Australian citizenship or permanent Australian residency before an offer of permanent employment is made.

<u>Note</u>: New Zealand citizens are considered to have a permanent resident status for the purposes of employment with NSW Health. When they enter Australia, they are generally granted a Special Category Visa (SCV) upon arrival, which allows them to remain and work in Australia as long as they remain New Zealand citizens. As evidence of having been granted an SCV, their New Zealand citizens' passports are stamped, showing the date of arrival in Australia.

<u>Note</u>: All other people entering Australia require passports and appropriate visas and entry permits.

<u>Note</u>: The requirement for Australian citizenship or permanent residency also applies to conversion to permanent appointment for nursing positions (refer to <u>Appendix</u> 1.6).

A person who is not an Australian citizen or permanent resident is only eligible for temporary employment for a period not longer than the duration of their current visa.

In some cases, sponsorship by an Australian organisation is a requirement for a visa. NSW Health organisations may only consider sponsorship of a suitable overseas candidate for (permanent or temporary) residency if they have taken all reasonable steps to establish through labour market testing that there are no suitable Australian citizens / permanent residents for the vacancy.

In addition, Health organisations must meet any specific immigration requirements, ie any provisions of the current <u>Labour Agreement</u> between NSW Health and the <u>Department of Immigration and Border Protection</u> and/or any requirements of the proposed visa class and stream.

Note: Any visa related questions should be directed to the <u>Department of Immigration and Border Protection</u>.

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<u>Note</u>: See also <u>Section 2.12</u> regarding conditional offers of permanent employment prior to securing permanent residency.

2.11 Preference matching in bulk recruitment campaigns

In bulk recruitment, where successful applicants need to be placed into positions that may be available across a NSW Health organisation, or across NSW Health, any matching of preferences with available positions must take place <u>after</u> the selection process has been completed. Preferences must not be used to cull or select applicants, as they do not relate to the applicants' ability to do the job, but to their preferred job location.

2.12 Make the formal job offer

HR/Recruitment Units have the final responsibility to confirm that all required actions (including all checks and verifications) have been completed before any offer of employment.

Where Health organisations need to activate the emergency appointment provisions in the <u>employment checks policy</u> due to an incomplete National Criminal Record Check or Working With Children Check, they may make a conditional offer in the first instance, subject to the requirements of the policy.

Any offer of employment to an applicant who is not an Australian citizen or permanent resident must specify that it is on a temporary basis and not guaranteed beyond the specified end date, notwithstanding that the applicant's visa may be for a longer time period.

During an official NSW Health recruitment campaign for clinical staff, Health organisations may make a conditional offer of permanent or temporary employment to a suitable overseas applicant before they secure permanent / temporary residency where:

- An offer of employment is required for them to apply for residency and
- It has already been established that there is no suitable local applicant and
- There is an urgent need to fill these frontline positions.

<u>Note</u>: Residency status must be checked and confirmed before the person begins employment within NSW Health. Where the person has not been granted residency, the offer of employment must be withdrawn in line with the provisions of the conditional offer.

Staff specialist recruitment – see <u>also Section 2.12 of Module Two</u>.

2.12.1 Employment documentation

A formal offer of employment must be made in writing through StaffLink Recruitment and provide the successful applicant with sufficient information about the terms and conditions of their employment. The applicant must be advised that the offer is subject to his or her agreement to abide by these terms and conditions, including the requirement to comply with the NSW Health Code of Conduct.

All letters of offer must use one of the standard templates provided in StaffLink Recruitment. The templates reflect the requirements outlined in *Appendix 1.12*.

Health organisations may consider setting a probation period of up to 3 months for new staff to the NSW Health Service only, unless otherwise provided by relevant legislation or industrial

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award. People re-entering the NSW Health Service after an absence of two years or more would also be considered new staff.

<u>Note</u>: Probation periods must not be applied to existing NSW Health Service staff regardless of whether their new role is in the same Health organisation or elsewhere in NSW Health.

Probation periods are not to be applied to any trainee programs that already contain their own progress assessment processes (including Junior Medical Officers).

The successful applicant must be advised that they will be subject to probation review during and at the end of the probation period to (refer to the Public Service Commission's <u>Managing for Performance – Guide for Managers</u> for further guidance on probation reviews, including setting expectations, monitoring, providing support, and taking action if the new staff member's performance fails to meet expectations).

The successful applicant must be asked to accept the offer and the related conditions online before they commence duty. They must not make any alterations to the letter of offer.

Staff specialist recruitment – refer to <u>Section 3.1.1 of Module Two instead</u>.

2.12.2 Where an offer is declined

Where the recommended candidate declines the offer, Health organisations may use any eligibility list created to fill the vacancy. Before making any offer of employment to the next ranked applicant on the eligibility list, Health organisations will need to conduct any outstanding actions from <u>Section 2.8.5</u> of this Module onwards (including referee checks and all other mandatory checks and verifications).

Staff specialist recruitment – refer to Section 2.12.2 of Module Two instead.

2.13 Advise unsuccessful applicants

Health organisations must advise unsuccessful applicants in a timely manner in writing that their application was not successful. They can provide this advice as soon as it is determined that an applicant will not proceed to the next stage of the process, or at the end of the entire recruitment process. The advice must include contact details (usually the convenor's) in case applicants wish to seek feedback on why their application was unsuccessful. Unsuccessful applicants are also entitled to seek and receive information of the identity of the successful applicant once the offer of employment has been accepted and the appointment can be made public (however, this does not apply to bulk recruitment).

If an applicant is placed on an eligibility list, the letter must include advice about this, along with the period of time that the eligibility list will remain current (usually 12 months from date of approval of the list, unless otherwise provided by the relevant Award). Applicants placed onto any eligibility list must also be given the option to be placed into any broader NSW Health Recruitment Pool, if they wish to be considered for other similar positions across the NSW Health Service at the same level and same occupational stream.

Staff specialist recruitment – refer also <u>Section 2.13 of Module Two</u>.

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2.14 Post-selection feedback

Health organisations should encourage unsuccessful applicants to seek feedback on their application as soon as possible after having been advised of being unsuccessful. Such feedback must be provided upon request, usually by the convenor of the selection panel, and a record of the feedback kept with the selection records.

<u>Note</u>: NSW Health organisations may consider providing brief written feedback to applicants in their unsuccessful letters, particularly if a large volume of requests is likely and it is not practical to provide direct feedback.

Feedback must:

- Take account of relevant information the panel used to make a decision about the applicant from all stages of the selection process (where applicable) eg written application, further assessments, interview performance, referee feedback etc
- Be provided in a constructive and useful way.

<u>Note</u>: Constructive and useful feedback supports good relations with potentially successful future applicants, and can minimise the likelihood of complaints or GIPA requests for selection records.

2.15 Retention of records

Health organisations must retain all recruitment and selection records in line with <u>Appendix</u> <u>1.13</u> in order to meet the requirements of State Archives and Records around minimum retention periods for government records.

<u>Note:</u> Recruitment and selection records collected in the StaffLink Recruitment will be stored in the system indefinitely to allow for a broad range of reporting over different periods of time, as well as the use of existing applicant information in subsequent recruitment processes, as appropriate.

Note: Certain information / documentation must also be placed on the successful applicant's StaffLink record (as outlined in *Appendix 1.13*).

In accordance with the <u>Privacy and Personal Information Protection Act 1998</u>, selection panels and all other staff involved in managing the recruitment and selection process must treat all personal information about the job applicants confidentially. All records must be stored securely.

Staff specialist recruitment – refer to Section 2.15 of Module Two instead.

2.16 Complaints management: internal review

Unsuccessful applicants may seek to have an internal review of the process used to make a recruitment decision.

Any complaint about the selection process should:

 Be lodged in writing within 14 days of the date the applicant was advised they were unsuccessful (the time requirement does not apply to bulk recruitment, where different timeframes often apply to the entire recruitment process)



<u>Note</u>: Health organisations have the discretion to accept a review request outside this timeframe where this seems fair and justified.

- Clearly articulate specific concerns in relation to the process and where the complainant believes it has departed from the requirements outlined in the relevant NSW Health policy
- Be initially assessed by someone independent from the selection process.

If an initial assessment indicates that the requirements outlined in NSW Health policy may not have been followed, a more detailed review may be conducted.

<u>Note</u>: Any complaint received during the selection process should be promptly assessed to determine whether a detailed review is required before the process can continue.

Health organisations should only overturn a selection panel's recommendation and start a new process if the review finds such flaws in the initial process that the substantive validity of the recommendation must be questioned.

<u>Note</u>: In the event that a change in the recommended applicant occurs, any outstanding actions required by this or any other relevant Module will need to be completed before a new offer of employment.

2.17 Commencing work

Once appointed, the successful applicant should start work as soon as practicable within an agreed timeframe.

<u>Note</u>: In certain emergency situations, the applicant may start work provisionally before the criminal record checking process is finalised, provided the relevant provisions in the current NSW Health *employment checks policy* have been met.

<u>Note</u>: If a Health organisation has made a conditional offer before an applicant has secured permanent or temporary Australian residency (eg overseas recruitment campaigns), it must check and confirm the applicant's residency status before they start employment within NSW Health.

Onboarding will start through StaffLink Recruitment as soon as the successful applicant accepts an offer of employment. This will allow for the timely management of required payroll information, relevant systems and facilities access, and induction activities.

Start date for frontline positions should not be delayed purely because there are no vacancies in the relevant orientation program, unless attendance is considered absolutely necessary.

The manager of the new staff member must begin initial performance discussions with the staff member as part of general induction. A performance agreement must also be developed in accordance with the current NSW Health policy on <u>managing for performance</u>.

Staff specialist recruitment – refer also to Section 2.17 of Module Two.

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3 LIST OF ADDITIONAL MODULES

As well as the mandatory requirements specified in Module One, certain employment groups have additional, modified or differing requirements that must be met when filling a position in that particular group. Any such requirements are contained in correspondingly titled additional Modules, which are listed below and form part of this Policy Directive. Before any recruitment and selection processes commence, this list must be checked to determine whether further requirements exist for the position being filled. Where they do exist, the requirements of both Module One and the additional Module must be met.

Module number	Title
Module 2	Recruitment and Selection of Staff of the NSW Health Service - Additional Requirements for Staff Specialists and Clinical Academics.
Module 3	Rescinded.
Module 4	Rescinded. During a 2-year transition period for Junior Medical Officer recruitment, the requirements for the Junior Medical Officer Annual Recruitment Campaign, as well as ad hoc recruitment, will be contained in a separate, stand-alone policy directive.
Additional Modules n	nay be added to this list from time to time.



4 LIST OF APPENDICES

Module One is supported by a number of Appendices as follows:

Number	Title
Appendix 1.1	Critical actions for casual or temporary employment under 13 weeks
Appendix 1.2	Identifying and managing vacancies
Appendix 1.3	Timeframe for standard recruitment and selection processes
Appendix 1.4	Position information – mandatory requirements *
Appendix 1.5	Selection criteria – mandatory requirements
Appendix 1.6	Options for filling vacancies in the NSW Health Service
Appendix 1.7	Recruiting Aboriginal people into the NSW Health Service
Appendix 1.8	Recruiting people with a disability into the NSW Health Service
Appendix 1.9	Information to be provided to applicants **
Appendix 1.10	Referee checks – mandatory requirements *
Appendix 1.11	Mandatory checks and verifications – checklist *
Appendix 1.12	Letter of offer of employment – mandatory requirements *
Appendix 1.13	Retention of recruitment and selection records *

^{*} Integrated into the StaffLink Recruitment and Onboarding system

All Appendices listed above are attached at the end of this Module, and can also be accessed as separate documents on the NSW Health intranet site at http://internal.health.nsw.gov.au/jobs/recruitment/index-recruit.html.

^{**} Integrated into the NSW Health Career Portal



Appendix 1.1: Critical actions for casual or temporary employment for under 13 weeks

Where a manager identifies a short term vacancy in their area, they must undertake and document an assessment to determine whether the position needs to be filled. They should consider factors such as service provision requirements and impact on the workload of other staff.

While the process contained in Module One of the current NSW Health recruitment and selection policy does not generally apply to casual or short-term vacancies under 13 weeks, managers must still assess the suitability of any candidate for the position. All relevant mandatory checks and verifications must take place before any offer of employment.

The process would usually include the following:

- Review position information to ensure it is still current and can be used as an accurate basis for the assessment of suitability of potential candidates.
- Review options for filling the vacancy (see <u>Appendix 1.6</u> of the current NSW Health recruitment and selection policy).
- Request and assess information from potential candidate(s) against position information to ensure their ability to undertake the duties of the position.
- Undertake referee checking, including with a current supervisor.
- Undertake or confirm as current all mandatory checks and verifications required for the position, in line with <u>Appendix 1.11</u> of this policy directive.
- Assess outcomes of any verifications/employment checks and initiate risk management action as appropriate.
- Seek appropriate approval for appointment.
- Make the job offer.
- If accepted, make sure that all recruitment and selection documentation is retained in line with <u>Appendix 1.13</u> of this policy directive.

When engaging locum medical officers through a locum agency, follow the current NSW Health policy on *locum medical officers*.

Staff specialist recruitment – See also <u>Section 2.3 of Module Two</u> on temporary employment of staff specialists, and <u>Appendix 2.1 of Module Two</u>, Critical Actions Compliance Declaration.

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Appendix 1.2: Identifying and managing vacancies

All NSW Health managers must be actively aware of the staffing situation and vacancies within the workforce teams under their responsibility, including:

- Casual or temporary vacancies eg due to staff leave
- Impending transfers, both in and out
- Resignations and terminations
- Positions held for appointees who have been appointed but are yet to commence duties
- Routine internal rotations of staff.

Managers should regularly review the full time equivalent (FTE) staff required for their area in response to changes in activity. Having the current staffing situation and predicted FTE vacancy clearly documented and available at all times will assist managers streamline recruitment processes and avoid delays in recruiting frontline or essential staff.

NSW Health organisations should regularly monitor and review positions that have an impact on frontline or essential services to confirm the ongoing need for them, having regard to workload and the continued appropriateness of their classification and grading.

Unless such review demonstrates that there is no longer a need for the position, or that its classification and grading requires change, Health organisations must take action to fill a vacant frontline or essential position on a permanent or temporary basis (as appropriate) as soon as the vacancy is impending.

Health organisations should also integrate identifying and managing vacancies with broader workforce planning and include consideration of the organisation's workforce priorities (including any diversity strategies and targets).

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Appendix 1.3: Time frames for standard recruitment and selection processes

- Process must commence as soon as manager becomes aware of pending vacancy.
- Timeline may vary for recruitment campaigns, walk-in applications or where formal job evaluation is required. For established positions, especially front line positions, time from when approval is sought to fill the vacancy to the offer of employment should be a maximum of 40 business days. Medical position, where delineation of the scope of practice is required may necessarily take longer.

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5 Days

Review ongoing need for the position and the appropriateness of its classification and grading.

ACTION

Seek approval to fill the

Approval to be granted in no longer than 10 days.

position.

Use standard state-wide position/role descriptions in the PD library.

If a standard state-wide PD does not exist, use an existing PD from your organisation (PDs are anchored to groups of jobs), copy and edit as appropriate.

STRATEGIES TO SPEED UP ACTION

Plan for enough time for new PD approvals, or use a generic PD.

Use online approval process to seek budget approval of position and associated PD. Add any relevant position notations online for approvers.

Delegate authority to approve to lowest level practicable and avoid multiple approvals.

Position information - Fill options

5 Davs

Review position/role description and selection criteria, identify any minor variations needed and update as necessary.

Explore redeployment, eligibility lists, and other options for filling the vacancy (Appendix 1.6).

Prepare advertisement and any additional job information, and place on the NSW Health Career Portal.

Establish a central point for a list of

injured workers in your organisation.

identify displaced employees, current

eligibility lists and Recruitment Pools.

Utilise the recruitment system to

Use the standard advertisement

information for applicants on the

quantifiable and text questions to

expedite faster culling. Not all

selection criteria need to be

assessed at application.

NSW Health Career Portal).

template in the recruitment system.

tailor attraction messages, provide

links to any additional information (eq

Set up application form using a mix of

Advertising - Panel

10 Davs Advertisement appears/closes.

Confirm selection panel membership.

Provide panel members (including externals) with appropriate temporary access to the recruitment system.

Establish selection panel as

placed; book cull date and

further assessment dates.

soon as advertisement has been

Ensure all panel members have

to the position either online or

offline, and to any information

role on the panel.

necessary for them to fulfil their

Convenors may enter selection

outcomes into the recruitment

system on behalf of the whole

Prepare and agree interview /

assessments content, ensuring all selection criteria are

panel; panel still signs off

Recommendation Report.

assessed in some form.

access to all information relevant

Cull

Provide panel members with access to all applications.

5 Davs

Conduct cull and agree on

Schedule assessments, including interviews.

Panel agree on shortlist benchmark (over the phone).

Utilise quantifiable questions set up in the application to review candidates against benchmark.

Convenor prepares the proposed shortlist and agrees outcomes with panel members.

Where practical, book all further assessments for the same day. leaving time for the panel to deliberate afterwards.

Assessments -Recommendation

5 Davs

Conduct further assessments including interviews.

Determine preferred applicant(s) and e-list.

Conduct referee checks on the preferred applicant(s).

Prepare and sign off Recommendation Report.

Confirm candidates have completed referee and other required information online before interview. Remind them to bring original documents and copy of completed 100 points ID

management line as practicable.

Checks

5 Davs Conduct all mandatory checks and verifications

Assess outcomes of checks and verifications and take any required appropriate risk management action.

Have checks and

Utilise any known

centrally by

verifications conducted

HR/Recruitment Unit.

Make the job offer/s. required for the position. Advise unsuccessful

Offer -

Onboarding

5 Days

applicants, if not already done. Finalise record

keeping.

Commence onboarding activities online.

Advise unsuccessful applicants as soon as they become unsuccessful throughout the process.

information. Do not spend form to interview. money / time on external validations where valid Delegate authority to information is already approve recommendations available. as far down the

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Appendix 1.4: Position information – mandatory requirements

These requirements have been built into the StaffLink Recruitment and Onboarding system.

oropriate stage(s) of the recruitment and selection process:
Position title (to be used when referring to the vacancy)
Classification, grade and remuneration under the relevant Health Award/Determination
Core functions, responsibilities and accountabilities of the position, including work health and safety responsibilities specific to the role being undertaken
Any mandatory physical, psychological or sensory requirements necessary to perform the inherent requirements of the job, and how they will be assessed. (Refer to the NSW Health job demands checklist and the current



Appendix 1.4 continued

Vaccination category of the position, and mandatory vaccination requirements (refer to the current NSW Health policy on <u>occupational assessment, screening and vaccination against specified infectious diseases</u>)
Information about the classification of the position in relation to mandatory National Criminal Record Checks and Working With Children Checks (refer to the current NSW Health policy on employment checks).
Information on the NSW Health CORE values (refer to the current NSW Health Code of Conduct).



Appendix 1.5: Selection criteria – mandatory requirements

An	y selection criteria developed must:
	Be limited to a maximum of eight
	<u>Note</u> : Some additional pre-screening criteria may be set where appropriate (for example, for an identified or targeted position, membership of a particular EEO group could be a pre-screening criterion). Such criteria may help shortlist candidates for further assessment more effectively.
	Describe the essential requirements for the position only (not desirable requirements)
	Outline the minimum skills, knowledge, experience and any other attributes required to perform the inherent requirements of the job (excluding skills that can be learned in a reasonable time on the job)
	Reflect any relevant legislative and/or Award requirements
	Specify any relevant mandatory professional registration, licence requirements, membership of state or national associations and/or authority to practice requirements
	Only include qualifications where they are a legal or Award/Determination requirement for the position
	Note: Where a professional qualification would enhance the capacity of the applicant to undertake the duties of the position, but is not a legal or Award/Determination requirement, include the following: A degree in a relevant field, or equivalent work experience, or a combination of study and work experience.
	Note: If the manager believes there is a strong argument for including, as mandatory, a qualification in the selection criteria that is not a legal or Award/Determination requirement, they may seek approval from the relevant Chief Executive or delegate for this.
	Specify any other educational requirements for the position, for example, acceptance into a recognised training program
	Only include minimum length of previous work in the profession where it is a legal or Award/Determination requirement in relation to the position
	Specify any requirement for membership of a particular EEO group for identified or targeted positions (including reference to relevant legislative provisions), or any requirement for an understanding of such a group
	Unless an identified or targeted position, not be less favourable to a particular EEO group than to others
	Exclude any preference or availability to work in particular locations, as this does not relate to the applicants' merit for the position, but to their preferred job location (see <u>Section 2.11</u> regarding preference matching).



Appendix 1.6: Options for filling vacancies in the NSW Health Service

Refer to Section 2.3 of the current NSW Health policy Recruitment and Selection of Staff to the NSW Health Service

Fill option	Type of vacancy allowed		Source	of applica	ants		Summary of requirements Refer to relevant legislation, industrial instrument or policy for further information	Relevant legislation / industrial instrument /	Processing system
	Perm	Temp	Health org	NSW Health Service	NSW Govt Sector	External		policy	
Priority assessment Redeployment of injured staff	1	✓	~				 Must be explored before any other fill option Priority assessment applies to permanent staff of the Health organisation with a work-related illness / injury that prevents them from returning to the duties of their existing position Health organisations must have a process in place to identify injured staff members suitable for redeployment The staff member must meet the selection criteria of the position or demonstrate capacity to meet them in an agreed period, supported by training if necessary The position duties must be consistent with medical opinion on suitable duties and the staff member's injury management plan. 	PD2013 006 Injury Management and Return to Work Workers Comp legislation	StaffLink Recruitment
Priority assessment Redeployment of excess / affected staff	1		~	~	✓		 Must be explored before any other fill option Priority assessment applies to permanent excess staff of the NSW Health Service (check Redeployment Register on the recruitment system), and to any identified affected staff The staff member must meet the selection criteria of the position, or be likely to perform adequately in it in a reasonable period of time, supported by training if necessary. The position must be of equivalent salary to the staff member's former substantive position, ie within 5% of it (or lower, if the staff member consents). 	PD2012 021 Managing Excess Staff	StaffLink Recruitment



Fill option	Type of vacancy allowed		Source	of applica	ants		Summary of requirements Refer to relevant legislation, industrial instrument or policy for further information	Relevant legislation / industrial instrument /	Processing system
	Perm	Temp		Internal		External		policy	
			Health org	NSW Health Service	NSW Govt Sector				
Priority assessment Government sector employees affected by transfer of services	1		~	*	✓		 If applicable, must be explored before other fill options Priority candidates may be identified where Government Sector services / functions transfer to the Non-Government Sector A whole-of-government placement strategy may be implemented if such transfers are planned. It aims to facilitate continued employment in the public sector for staff who will not be offered comparable employment with the new provider. Home agencies that expect not to be able to place such staff within their own agency may, assisted by NSW Industrial Relations and the Public Service Commission, contact other government sector agencies to assess their potential for placing staff in line with Premier's Memorandum 2016-02. 	Premier's Memorandum 2016-02, Transfer of Government Sector services or functions to the Non- Government Sector	StaffLink Recruitment
Conversion to permanent appointment or increase in hours – nursing positions	1		~				 NSW Health organisations must review without delay any request by: a casual nurse to convert to permanent employment. In such instances, the phrase 'regular and systematic basis for a sequence of periods of employment' means work that has occurred within a NSW Health organisation. a permanent part-time nurse to increase their contracted hours or convert to full-time status. Such requests must not be unreasonably refused. Either situation is managed as a contract change only. 	Clause 29 of the <u>Public Health</u> <u>System Nurses</u> <u>and Midwives</u> (State) Award	eForms



Fill option	Type of vacancy allowed		Source	of applica	ants		Summary of requirements Refer to relevant legislation, industrial instrument or policy for further information	Relevant legislation / industrial instrument / policy	Processing system
	Perm	Temp	Health org	Internal NSW Health Service	NSW Govt Sector	External		monument, peney	
Eligibility list	1	~	~	~	✓	~	 NSW Health organisations may use an e-list for the position for which it was created, or other positions (including at other locations) that are of the same grade and have substantially the same selection criteria E-lists do not have to be used where it seems fairer or more appropriate to take other action E-lists are valid for 12 months (unless otherwise provided by the relevant Award) When using an e-list, Health organisations must make employment offers in the order in which the names appear on the list (ie merit order). The hiring manager must be satisfied that the candidate can still meet the inherent requirements of the position. Two referee checks and any other remaining checks and verifications (as required by this policy directive) must be completed / checked for currency before offer. 	Any relevant NSW Health Industrial Award takes precedence over this policy directive	StaffLink Recruitment
Recruitment Pool	*	✓	✓	✓	~	✓	 Health organisations may consider candidates in a Recruitment Pool who are in the same occupational stream and at the same level/grade as the vacancy A pool candidate may be assessed for suitability as a single candidate, or invited to be considered alongside other applicants Further assessment of the candidate against the position must involve, at a minimum, an interview by the manager. 		StaffLink Recruitment



Fill option	Type of vacancy allowed		Source	of applica	ants		Summary of requirements Refer to relevant legislation, industrial instrument or policy for further information	Relevant legislation / industrial instrument / policy	Processing system
	Perm	Temp	Health org	NSW Health Service	NSW Govt Sector	External		instrument / policy	
Recruitment Pool - continued							 Two referee checks and any other remaining checks and verifications (as required by this policy directive) must be completed / checked for currency before offer. Candidates stay in the pool for 12 months, including where employed within that period. Recruitment Pools are not yet available for staff specialists. 		
Eligible persons under Government Sector Employment Rule 26 (Streamlined recruitment of certain groups disadvantaged in employment)	~	*	*	*	*	~	 'Eligible person' means any of the following: an Aboriginal person or Torres Strait Islander, a person with a disability, a person under the age of 25 years, a person who, on or after 1 December 2015, enters or has entered Australia on a Refugee and Humanitarian (Migrant) (Class XB) visa issued by the Commonwealth, a person who belongs to a group designated by the Public Service Commissioner as disadvantaged in employment. Health organisations may modify the recruitment process (other than any legal or Award requirements) as necessary to take into account particular barriers to employment for 'eligible persons' (eg a recent refugee may not be able to provide a current supervisor as a referee – panel may accept alternative referees) Health organisations may also source / identify 'eligible persons' through a number of means as necessary, ie 	GSE Rule 26 Appendix 1.7 of this policy on recruiting Aboriginal people Stepping up (NSW Health online resource for recruiting Aboriginal workforce) NSW Health Disability Inclusion Action Plan Disability employment (PSC website)	StaffLink Recruitment



Fill option	Type of vacancy allowed		Source	of applica	ants		Summary of requirements Refer to relevant legislation, industrial instrument or policy for further information	Relevant legislation / industrial instrument / policy	Processing system
	Perm	Temp		Internal		External		mistrament / poncy	
			Health org	NSW Health Service	NSW Govt Sector				
Eligible persons under GSE Rule 26 - continued							 targeted advertising approaching an employment support service / agency for resumes of potential candidates approaching an eligible candidate directly and inviting them for assessment Generally, if there is likely to be a healthy pool of suitable eligible applicants, the vacancy should be advertised. 	 Appendix 1.8 of this policy on recruiting people with a disability Refugee <u>settlement</u> (NSW Government website) 	
Transfer (ie permanent transfer of an existing staff member)	1		~	~	✓		 GSE Rules 29, 30 and 34 apply to transfers from another Government Sector agency (including another NSW Health organisation). Transfers within a NSW Health organisation must also be consistent with the relevant conditions under GSE Rules 29,30 and 34. A staff member may be permanently transferred to another Government Sector agency by agreement between the agency heads, or to another position within a Health organisation with the approval of the Chief Executive or delegate. The transfer must be at level, unless the staff member consents to a transfer below level. The suitability of the candidate must be assessed and all mandatory checks and verifications (as required by this policy directive) completed/checked for currency before offer. 	Part 6 of the GSE Rules 2014	eForm (if candidate from within NSW Health) StaffLink Recruitment (if candidate from another Government Sector agency or a recruitment process needed).



Fill option	Type of vacancy allowed		Source	of applica	ants		Summary of requirements Refer to relevant legislation, industrial instrument or policy for further information	Relevant legislation / industrial instrument / policy	Processing system
	Perm	Temp		Internal		External		mstrument/poncy	
			Health org	NSW Health Service	NSW Govt Sector				
Permanent direct appointment	✓		✓	\	~	1	 Health organisations can make a permanent direct appointment without advertising with the approval of the Chief Executive or delegate if: The position was advertised as permanent in the preceding 		StaffLink Recruitment
(including walk-in applicants)							six months (either through a one-off or an ongoing / rolling advertisement) and no suitable candidate was identified and The position requirements (incl. selection criteria) are substantially unchanged and The job market has not changed in the last six months and There is a state or local shortage in the occupation and Urgent filling is required to meet service delivery needs and All relevant legislative and award provisions are met. In addition, where a formal, approved graduate/training program or cadetship provides for ongoing employment upon successful completion of the program, the Chief Executive or delegate may directly appoint a successful participant permanently into an available relevant and suitable vacancy in their Health organisation (eg NSW Aboriginal Nursing and Midwifery Cadetship Program). In all cases, the suitability of the candidate must be assessed and all mandatory checks and verifications (as required by this policy) completed / checked for currency before offer.		



Fill option	Type of vacancy allowed		Source	of applic	ants		Summary of requirements Refer to relevant legislation, industrial instrument or policy for further information	Relevant legislation / industrial	Processing system
	Perm	Temp	Health org	NSW Health Service	NSW Govt Sector	External		instrument / policy	
Secondment (ie temporary transfer of existing staff) - At level - Above level		1	~	~	1		 Health organisations may fill temporary vacancies by seconding existing staff with or without advertising. GSE Rules 31 and 34 apply to secondments from another Government Sector agency (including another NSW Health organisation). Secondments within a NSW Health organisation must also be consistent with the relevant conditions under GSE Rules 31 and 34. A staff member may be seconded to a position for up to 2 years only. (A need to extend beyond 2 years should trigger a review of whether the position should be permanent.) Secondments can be at level or above level (developmental opportunity). The suitability of the candidate must be assessed and all mandatory checks and verifications (as required by this policy) completed / checked for currency before offer. 	• Part 6 of the GSE Rules 2014	eForms
Higher grade duty (internal acting arrangements)		✓	~				 Health organisations may call upon a staff member to relieve or act in a position of a higher classification within the same Health organisation where their substantive position is located Health organisations must pay the staff member the minimum payment for the higher classification for any continuous period of at least five working days of such relief or acting. 	Relevant <u>NSW</u> Health Award	eForms



Fill option	vacan	Type of vacancy allowed		of applica	ants		Summary of requirements Refer to relevant legislation, industrial instrument or policy for further information	Relevant legislation / industrial instrument / policy	Processing system
	Perm	Temp	Health org	NSW Health Service	NSW Govt Sector	External		,	
Temporary direct appointment (over 13 weeks) (including walk-in applicants)		~	~	~	*	•	 Health organisations can make a temporary direct appointment with the approval of the Chief Executive or delegate if: The period of employment does not exceed 12 months and The position requires urgent filling to meet patient service delivery needs and Funds are used efficiently and All relevant legislative and award provisions are met. In addition, where a formal, approved graduate/training program or cadetship provides for temporary employment upon successful completion of the program, the Chief Executive or delegate may directly appoint a successful participant temporarily into an available relevant and suitable vacancy in the Health organisation (eg Graduate Health Management Program). The purpose of such a placement is to consolidate the learnings from the program In all cases, the suitability of the candidate must be assessed and all mandatory checks and verifications (as required by this policy) completed / checked for currency before offer. 		StaffLink Recruitment
Walk-in applicants	*	✓	~	V	~	1	 Health organisations may consider employing an applicant who contacts them outside a current recruitment process, if the applicant has skills and qualifications in urgent demand in that organisation The conditions for permanent/temporary direct appointments (above) apply 		StaffLink Recruitment



Fill option	Type o	су	Source	of applic	ants		Summary of requirements Refer to relevant legislation, industrial instrument or policy for further information	Relevant legislation / industrial instrument / policy	Processing system
	Perm	Temp	Health	Internal NSW	NSW	External		madument/policy	
			org	Health Service	Govt Sector				
Walk-in applicants - continued							Walk-in nurse applicants must be advised of the outcome within five working days from the start of the assessment.		
Casual and temporary employment under 13 weeks		✓	•	•	✓	✓	 Locum medical officers must be sourced in line with the current NSW Health policy on locum medical officers For short-term temporary employment of staff specialists, refer to section 2.3 of Module Two of this policy A mandatory NSW Government prequalification scheme exists for contingent workforce sourced through employment agencies In areas of frequent demand, Health organisations may consider establishing casual pools to facilitate the speedy management of ad hoc short-term vacancies (eg staff sick leave etc) The suitability of any candidate must be assessed in line with Appendix 1.1 of this policy, and all relevant mandatory checks and verifications must take place. 	PD2013_022 Locum Medical Officers NSW Government contingent workforce prequalification scheme - SCM007 Appendix 1.1 of this policy on casual / temporary employment	StaffLink Recruitment
Competitive merit-based recruitment	/	~	✓	✓	✓	/	 Unless other fill options outlined in this Appendix are more appropriate, Health organisations must advertise their vacant positions and follow a comparative merit selection process in line with this policy directive. 		StaffLink Recruitment



Fill option	Type of vacandallowe	су	Source	of applic	ants		Summary of requirements Refer to relevant legislation, industrial instrument or policy for further information	Relevant legislation / industrial instrument / policy	Processing system
	Perm	Temp	Health org	NSW Health Service	NSW Govt Sector	External		monument / poncy	
Using executive search / recruitment consultants	✓	*				~	 Chief Executives must determine local processes for any use of executive search/recruitment consultants, including as a minimum that: The Health organisation makes every effort to fill positions through the usual avenues first The Health organisation follows any relevant NSW Health policies, including the mandatory requirements of this policy directive NSW Health organisations must use any current state wide arrangements (eg Panel of Overseas Recruitment Agencies) which the Ministry has approved and formally communicated to the Health system - for advice on any such arrangements contact the Ministry's Workforce Planning and Development Branch. 	PD2013 041 Panel of Overseas Recruitment Agencies (PORA)	StaffLink Recruitment or Fieldglass



Appendix 1.7: Recruiting Aboriginal people into the NSW Health Service

Recruitment and Selection Training: Respecting the Difference

Convenors and panel members must have undertaken the available <u>Respecting the Difference</u> <u>Aboriginal Cultural Training Program</u> and have a functional knowledge of:

- culturally safe work spaces
- culturally safe client care
- · social and cultural determinants of Health
- culturally safe service delivery
- local Aboriginal community engagement
- cultural competence
- NSW Health Code of Conduct
- NSW Health CORE values
- Closing the Gap and patient care outcomes
- Closing the Gap and Aboriginal employment and economic development outcomes.

The <u>Stepping Up</u> online recruitment and retention resource provides additional support for hiring managers.

Legislative provisions that support Aboriginal employment

The following legislative provisions support employment of Aboriginal people and Torres Strait Islanders:

Instrument	Reason	Source of potential candidates	Who can apply	Exemption needed
Government Sector Employment Rule 26	Disadvantage in employment of 'eligible persons', including Aboriginal persons and Torres Strait Islanders	Advertise (restricting to Aboriginal people); approach an eligible candidate directly; or source from an employment support service	Vacancy restricted to Aboriginal and Torres Strait Islander people only	No
NSW Anti- Discrimination Act 1977 – Identified position	Aboriginality is a genuine occupational qualification ie essential to do the job	Advertise (restricting to Aboriginal people)	Vacancy restricted to Aboriginal and Torres Strait Islander people only	No
NSW Anti- Discrimination Act 1977 – Targeted position	Redressing past or present discrimination in employment - Aboriginality is not essential to do the job	Advertise (either restricting or indicating preference for Aboriginal people)	Vacancy restricted to Aboriginal and Torres Strait Islander people OR Vacancy open to anyone but any suitable Aboriginal or Torres Strait Islander person will be given preference	Yes – refer to the <u>NSW</u> <u>Anti-</u> <u>Discriminati</u> <u>on Board</u>



Appendix 1.7 continued

See further detail below. The relevant Health organisation's Aboriginal Employment Coordinator or Manager of Aboriginal Workforce Development can also provide further advice.

Employment of eligible persons under Government Sector Employment (GSE) Rule 26

The <u>GSE Rule 26, Employment of eligible persons</u>, provides Government Sector agencies (including NSW Health organisations) with flexibility in employing 'eligible persons' who belong to one of the groups deemed to be disadvantaged in employment. These include Aboriginal persons and Torres Strait Islanders. There is no need to seek a separate exemption to use *GSE Rule 26*.

GSE Rule 26 can be used for both identified and targeted positions (for definitions, see the section below).

Under the Rule, Health organisations may modify the recruitment process (other than any legal or Award requirements) as necessary to take into account particular barriers to employment for 'eligible persons'. For example, Aboriginal candidates applying for identified or targeted positions may find it challenging to provide evidence of Aboriginality within the usual recruitment timeframes. This should be taken into account in recruitment processes – see section on 'Citing Aboriginality' below for further guidance.

Health organisations may also source / identify 'eligible persons' through a number of means as necessary, ie:

- targeted advertising, noting on the advertisement that applications are limited to Aboriginal persons and Torres Strait Islanders, who are deemed 'eligible persons' under GSE Rule 26.
- approaching an employment support service / agency for resumes of potential candidates
- approaching a potential candidate directly and inviting them for an assessment

This may need to be a case by case decision, but as a general rule, where there is likely to be a healthy pool of suitable eligible applicants, Health organisations should advertise the vacancy.

Identified and targeted positions under the NSW Anti-Discrimination Act 1977 (ADA)

The ADA continues to provide avenues to favour a particular group of people in situations where that would otherwise be unlawful. However, as <u>GSE Rule 26</u> can be used for both Aboriginal identified and targeted positions, and as it provides additional flexibility to recruitment processes, Health organisations should consider using it in favour of the ADA.

For the purpose of writing position descriptions and selection criteria, the definitions for 'identified' and 'targeted' positions used under the ADA remain useful.

Identified positions

For Aboriginal identified positions, Aboriginal identity, cultural knowledge or connections are genuine occupational qualifications for the roles, and only Aboriginal people are eligible for appointment to them.

Such positions are specifically noted under the provisions of the ADA for Aboriginal people who meet the following criteria:

- They are of Aboriginal and/or Torres Strait Islander descent, and
- They identify as an Aboriginal and/or Torres Strait Islander person, and
- They are accepted as such by the Aboriginal and/or Torres Strait Islander community.

Identified positions require specific reference to Aboriginality and relevant experience. This needs to be outlined in the requirements, advertising and recruitment materials for the position.



Appendix 1.7 continued

Targeted positions

For Aboriginal targeted positions, Aboriginality is not essential to do the job. Instead, the position is targeted to Aboriginal people to improve their general employment opportunities / outcomes.

Citing Aboriginality

Applicants for identified and targeted positions will be required to cite and corroborate their Aboriginality.

Respectively, each and every Aboriginal person has the inherent right to cite and corroborate their Aboriginality as they choose. Essentially the statutory requirements for Aboriginality are simple – it is based upon descent. Further descriptors are now recognised but are at the discretion of the individual.

Obtaining information that corroborates Aboriginality may be an extremely difficult and lengthy process. It is important that such difficulties are not a barrier for recruitment and that support is provided to applicants to explore their options for corroborating Aboriginality.

If applicants are unable to access documentation from their Local Aboriginal Land Council or other incorporated Aboriginal organisation, Health organisations should provide them with more flexible arrangements for corroborating their Aboriginality.

Such options may include:

- community advice
- statutory declaration
- referee checks
- family histories and contacts.

To support this, the applicant may demonstrate their Aboriginality and ties or connection to the Aboriginal community in which they live, or have lived or worked in, during the interview process.

An Aboriginal person who has previously held an identified position in a NSW government department is not required to re-cite their Aboriginality. However, the panel may, for the purpose of selecting the appropriate candidate for the position, seek additional information to ensure elements of the position relevant to local communities / position purpose are achieved through the recruitment process.

Answers to questions asked by the panel should show that the applicant meets the three determining criteria in the *NSW Aboriginal Land Rights Act 1983*. The applicant must:

- Be of Aboriginal descent and
- Identify as an Aboriginal person and
- Be accepted by the Aboriginal community in which he or she lives or has lived.

For further information please refer to the <u>Stepping Up</u> online recruitment and retention resource. The Public Service Commission is also currently updating their 'Confirming Aboriginality Guidelines for NSW Public Sector Agencies'.

The panel should also be aware that positions funded through Indigenous Cadetship Support may have additional requirements around citation of Aboriginality.



Appendix 1.7 continued

Referees

Referees play a crucial role in determining the most appropriate candidate for the position through the process assessment stage. It is important that training and support for external panel members should be considered and provided prior to the formation of the panel if possible.

External referees can provide the panel with additional and important information that the candidate can offer to the position. This could include advocating for the candidates cultural knowledge and understanding, local community knowledge, connection to community and citation of Aboriginality.

Aboriginal Employment Coordinators or Managers of Aboriginal Workforce can provide assistance with managing local communication and connection to local matters that may arise.

Orientation for Aboriginal staff

The Aboriginal person you have employed may be new to employment or to the organisation, or may have had different employment experiences within the system. A more personal orientation to the site, the unit and the team, other Aboriginal personnel and networks and understanding the purposes of the position and its context within the service, is a recommended first step in ensuring the new employee feels welcomed.

This can serve as a platform for introducing all the formal orientation activities which the new Aboriginal employee will be undertaking, and assist with the uptake of information and the development of trust within the new work environment.

Additional references

- Good Health Great Jobs: Aboriginal workforce strategic framework 2016-2020 (PD2016_053)
- Definition of an Aboriginal Health Worker (IB2014_001)
- NSW Health Aboriginal Health Worker Guidelines
- The Decision Making Framework for Aboriginal Health Workers



Appendix 1.8: Recruiting people with a disability into the NSW Health Service

Recruitment and selection training

Convenors and panel members should have undertaken the available HETI online training and have knowledge of:

- Disability etiquette techniques applicable to the interview process
- Recruitment process adjustments
- NSW Health Code of Conduct
- NSW Health CORE values
- Requirements under the *Disability Discrimination Act 1992*
- How to make mainstream recruitment inclusive for all.

Employment of eligible persons under GSE Rule 26

The <u>GSE Rule 26, Employment of eligible persons</u>, provides Government Sector agencies (including NSW Health organisations) with flexibility to employ 'eligible persons' who belong to one of the groups deemed to be disadvantaged in employment. These include persons with a disability. There is no need to seek a separate exemption to use *GSE Rule 26*.

Under the Rule, Health organisations may modify the recruitment process (other than any legal or Award requirements) as necessary to take into account particular barriers to employment for 'eligible persons'.

Health organisations may also source or identify 'eligible persons' through a number of means as necessary, including

- targeted advertising, noting in the advertisement that applications are limited to persons with a
 disability, who are deemed 'eligible persons' under GSE Rule 26; or that such applicants will be
 considered first
- approaching Disability Employment Services for resumes of potential candidates
- approaching a potential candidate directly and inviting them for an assessment.

This may need to be a case by case decision, but as a general rule, where there is likely to be a healthy pool of suitable eligible applicants with disability, Health organisations should advertise the vacancy.

Citing disability

Applicants for targeted position will be required to provide verification that they are a person with disability if their disability is not apparent. The evidence could include the following:

- Disability Support Pension Card
- Letter from a medical practitioner or health professional
- Support letter from Disability Employment Provider.

It is illegal to seek specific details about a candidate's disability under the <u>Disability Discrimination Act</u> <u>1992</u>.



Appendix 1.8 continued

Adjustments to the recruitment process

Most applicants with disability will not require adjustments during the interview process. However when they do, adjustments should be identified prior to the interview. Examples could include but are not limited to providing:

- an Auslan interpreter
- accompaniment by a support person
- accompaniment by an assistance animal such as a guide dog
- extra time to complete assessments
- interview documents in an electronic format that can be read by screen reading software such as JAWS
- work related assessment tasks in place of an interview for candidates on the autism spectrum.

Disability Employment Services can provide assistance in managing the recruitment process.

Workplace adjustments

It is a requirement under the <u>Disability Discrimination Act 1992</u> for employers to make, where necessary, workplace adjustments for person with disability to perform the job. Workplace adjustments enable a successful applicant to perform the inherent requirements of their role, such as changes to a process, practice, procedure or environment, and can be raised at the time of job offer. Work Health and Safety assessments must be conducted for the successful applicant to accommodate their needs preferably prior to commencing in the position.

The cost of recruitment and employment related adjustments may be met by the Australian Government Employment Assistance Fund. Further information can be found on the Australian Government *JobAcces* website.

Additional references

- Australian Government website: <u>JobAccess</u>
- Disability Discrimination Act 1992
- Disability Inclusion Act 2014 (NSW)
- NSW Health, NSW Health Disability Inclusion Action Plan
- Public Service Commission website: Disability and accessibility
- Public Service Commission website: Targeted recruitment
- Public Service Commission website: Workplace adjustments
- Employing people with disability interview tips (under development)



Appendix 1.9: Information to be provided to applicants

These requirements have been built into the NSW Health Career Portal. In addition to position information, applicants must be provided with information about the NSW Health recruitment and selection process and requirements, including: The steps of the selection process The need to address selection criteria / targeted questions about key selection criteria, and include an up-to-date curriculum vitae of employment history (for health care and other professional positions this must cover the last 10 years) ☐ Other supporting information/documentation that applicants will need to provide as they progress through the selection process (including referee details) Checks and verifications that the Health organisation will conduct on any preferred applicants before any offer of employment (including referee checks, a NSW Health Service Check Register check, a National Criminal Record Check, a pre-employment health assessment) ☐ How an applicant can obtain a Working with Children Check from the NSW Office of the Children's Guardian, where required ☐ For overseas applicants, information about additional criminal record check requirements and how they can apply for a Working with Children Check, where required. For identified or targeted positions (advertised under GSE Rule 26 or NSW Anti-Discrimination Act 1977), information about providing evidence of eligibility Staff specialist recruitment – see also section 2.5 of Module Two.



Appendix 1.10: Referee checks – mandatory requirements

These requirements have been built into the StaffLink Recruitment and Onboarding system.

Prepare a set of questions that includes (but is not limited to) the following:

- 1. How would you describe the applicant's skills / experience / competence (as appropriate) in relation to the position / selection criteria?
- 2. Would you re-employ the applicant if the opportunity arose? Why/why not?
- 3. Are you aware of any professional conduct or past performance issues that may be relevant and appropriate for us to consider?
- 4. In light of the information provided about the position, is there anything else you think would be relevant for us to consider?

Convenors / selection panels should also use referee checks to confirm any significant claims by the applicant in their application / interview, and to explore any gaps in their resume.



Appendix 1.11: Mandatory checks and verifications - Checklist

NSW Health organisations must complete, or confirm as current, all mandatory checks and verifications required for the position and any related risk assessments for any recommended applicant(s) before making an offer of employment. HR/Recruitment Units have the final responsibility to review and confirm online in the recruitment system that all such checks and verifications have been completed.

In limited circumstances only and subject to the emergency appointment provisions outlined in the current NSW Health policy on <u>employment checks</u>, the preferred applicant may start work before employment checks have been completed.

Staff specialist recruitment – refer to <u>section 2.8.3.1 of Module Two</u> (sight/collect or record details of mandatory documentation) and <u>section 2.10 of Module Two</u> (mandatory checks and verifications and related assessments), as well as <u>Appendix 2.1 of Module Two</u> (Critical Actions Compliance Declaration) <u>instead</u>.

Check / verification	Action required	Further information
☐ Educational, trade or professional qualifications, or proof of meeting any educational requirements (eg	Unless previously verified, sight original certificates and verify against copies uploaded online by applicant (if not already uploaded, scan in).	Health organisations do not need to review / verify qualifications used to gain registration, as these have already been verified by the registering authority.
acceptance into a recognised training program), if listed as selection criteria		If original tertiary qualifications (professional, academic or vocational) are unavailable, Health organisations may accept academic transcripts certified by the educational institution and including a statement that all requirements of the relevant course have been met.
		For overseas qualifications in a language other than English, where the original qualification is not available, the applicant must provide a transcript translated into English by an officially accepted state or commonwealth body, and certified as such (see www.border.gov.au or http://www.multicultural.nsw.gov.au/).



CI	neck / verification	Action required	Further information
	Evidence of length of experience, if listed as a selection criterion	Sight relevant documentation OR verify through referee checks.	
	Current professional registration/licence, including any conditions, if relevant to the position	Confirm directly with the registering/licensing authority and complete any related risk assessment activities.	
	Authority to prescribe, supply, dispense or administer prescribed restricted drugs of addiction, if relevant to the position	Review applicant's online declaration and check registration conditions. If a declared restriction is not reflected in the registration conditions, check the details with the Ministry of Health's Pharmaceutical Regulatory Unit to allow for adequate assessment – see http://www.health.nsw.gov.au/pharmaceutical/Pages/wda.aspx . Complete any related risk assessment activities.	Relates to substances listed in Schedule 4 and/or Schedule 8 of the Poisons List (proclaimed under the Poisons and Therapeutic Goods legislation – available at https://www.legislation.nsw.gov.au/#/).
	Membership / eligibility for membership of relevant professional boards, colleges or state/national associations, if relevant to the position	Confirm directly with the relevant body.	
	Evidence of relevant characteristics for identified or targeted positions / eligible persons	Eg citing of Aboriginality (see <u>Appendix 1.7</u>), or sight a relevant Refugee or Humanitarian (Migrant) Class visa and verify against details provided by applicant online	
	Additional checks / enquiries, where deemed necessary. This may include the Health Care Complaints Commission (HCCC) or the relevant registration authority, where the panel has concerns that a complaint about the applicant has recently been made.	Conduct and complete any related risk assessment activities.	When checking for any history of complaints or any professional performance issues with the HCCC or the registration authority, Health organisations should seek information on any pending disciplinary action involving the applicant, and the outcomes of any formal disciplinary investigations.



Check / verification	Action required	Further information
☐ Internal service check via the NSW Health Service Check Register (SCR)	Conduct the SCR check against all names provided by the recommended applicant to identify if they are subject to current enquiries into alleged misconduct or have been found to have engaged in misconduct. A screen capture of the SCR status search result must be uploaded into the recruitment system. Any related risk assessment activities must be completed by staff with experience in recruitment risk assessments.	See the current NSW Health policy on the NSW Health Service Check Register.
□ Working With Children Check (WWCC), for child related work only	Verify WWCC clearance number provided by the applicant, with the Children's Guardian and record details, including date of verification and expiry date.	See the current NSW Health policy on employment checks. Where a probity flag stating 'no records' appears with the WWCC clearance result, and the applicant has completed a NSW Health Criminal History Declaration stating 'no records', no separate NCRC is required unless the applicant is applying for an aged care position.
☐ 100-Point ID Check	Sight original documents and verify against 100-Point ID. Check form completed by the applicant online.	Required for a National Criminal Record Check. One of the ID documents must be a photo ID.
☐ Citizenship / residency or working visa status	Sight originals and verify against 100-Point ID Check form completed by the applicant online Verify working rights on VEVO (<i>Visa Entitlement Verification Online</i> service provided by the Department of Immigration and Border Protection.	May affect shortlisting / recommendation In some limited circumstances, where an applicant is from overseas, they may not be able to seek a visa without a conditional job offer. See <u>Section 2.12</u> for further information.



Check / verification	Action required	Further information	
 □ National Criminal Record Check (NCRC)/Aged Care Check (all new and existing staff where required) ○R □ WWCC clearance probity flag and completed NSW Health Criminal History Declaration (new child related workers only) 	NCRC consent form collected online. Check consent form details against details of the 100 Point ID Check. For positions in Aged Care only, collect the signed Commonwealth Aged Care Statutory Declaration. For overseas applicants only: review police check, or where not available, statutory declaration by applicant. Lodge NCRC (if not already done and if not subject to any exemptions). Any related risk assessment activities must be completed by staff with experience in recruitment risk assessments. No further action required where probity flag and criminal history declaration used.	See the current NSW Health policy on employment checks. Health organisations must not lodge an NCRC until the have completed all other checks and enquiries about t suitability of the preferred applicant, including the Service Check Register check. If the applicant has declared online that they have no criminal history and they have a WWCC clearance probity flag, no separate NCRC is required, unless the applicant is applying for an aged care position	
□ <i>Immunisation status</i> , where required	Existing and new staff: Sight original NSW Health Vaccination Record Card and/or other acceptable evidence, and verify against copies loaded online by applicant (if not uploaded, also scan in). Additional for new staff: Confirm that the applicant has submitted a New Recruit Undertaking / Declaration and TB Assessment online. Appropriately trained clinical staff must assess the applicant's immunisation status, as evidenced by the documentation provided.	See the current NSW Health policy on <u>occupational</u> <u>assessment, screening and vaccination against</u> <u>specified infectious diseases</u> .	
☐ Employment health assessment	The applicant provides a Health Declaration online. Appropriately trained WHS staff must assess the Health Declaration and any additional health assessment required.	See the current Public Service Commission policy on employment health assessment.	

Content that must be included in all letters of offer:



Appendix 1.12: Letter of offer of employment – mandatory requirements

The StaffLink Recruitment and Onboarding system provides a number of template letters. These should be used in conjunction with the requirements listed below.

<i>Introduction</i> : I am pleased to offer you employment in the <i>[Name of NSW Health agency]</i> , a Division in the NSW Health Service.
Position: You will be employed on a [full-time/part-time] basis as [position title, classification]. You will be based at [location, any rotations]. Your employment will be governed by [award/industrial instrument].
Start date / finish date (if applicable)
Hours of work: You will generally be required to work [insert number of days] days per week between the hours of [insert times]. [Include any requirements for roster or on-call availability.] It may be necessary to change the hours of work, any shift times and any on-call availability from time to time as required by the demands of the position.
Duties: Your position will involve the duties set out in the attached position/role description. You will also be expected to have a flexible approach to your duties and perform such other suitable duties as may otherwise be allocated from time to time. You will be consulted about any significant changes to your position or duties before they take effect.
Remuneration: Your remuneration will be determined in accordance with the [award/industrial instrument]. Your commencing rate of pay will be [insert rate from award/industrial instrument].
Reporting requirements: You will be reporting directly to [position/name of person] or otherwise as required by the employer.
Compliance with NSW Health policies: In accepting this position, you agree to support the NSW Health CORE values of collaboration, openness, respect and empowerment. In accepting this position, you agree to be bound by and comply with NSW Health Policy Directives, and any relevant local workplace procedures, as are in place, or issued, or amended from time to time, including but not limited to the NSW Health Code of Conduct .
Confidentiality: You will be bound by privacy legislation and ethical practice to maintain confidentiality.
Intellectual property: All intellectual property rights in any inventions, designs, works and subject matter created or discovered in the course of employment must be disclosed to the NSW Health organisation and will belong to and be the absolute property of the NSW Health organisation, or as may be nominated by the NSW Health organisation for that purpose, subject to and in accordance with NSW Health Policy Directives regarding intellectual property as may be issued and as may be amended from time to time.
Other matters: [Insert any other conditions of employment. See checklist further below.]
Secondary employment: You will need to seek approval to undertake any secondary employment in line with the <u>NSW Health Code of Conduct</u> .
Confirmation of acceptance and contact person: Please confirm your acceptance online. Any questions may be directed to [insert details].



Appendix 1.12 continued

	Acceptance of offer: I declare that the information I have provided as part of my application is genuine and acknowledge that any false claims or statements made in applying for this position may lead to my dismissal. I accept the conditions applicable to my appointment and the duties and responsibilities set out in the accompanying position description.
Signa	ature by online ID + date
Othe	r content that must be included in letters of offer, where applicable:
	Special arrangements : arrangements which do not form part of the ongoing terms and conditions of employment are to be stated in a way that makes it clear that they are not ongoing arrangements (eg provision of a private use motor vehicle or managerial allowances).
	Visa requirements: statement about any identified visa requirements.
	Specific conditions: any specific conditions or Policy Directives that apply to the employment eg conditions arising from a risk assessment (see current NSW Health policy on employment checks).
	Requirement to maintain current registration, licences, Working With Children Checks etc: You must maintain as current any registration, licences or checks required for your position.
	Private practice arrangements for staff specialist appointments
	Conditional appointment: a statement relating to conditional appointment pending satisfactory National Criminal Record Check clearance or Working With Children Check clearance, where relevant (see current NSW Health policy on employment checks ; or pending permanent residency being granted by the Department of Immigration and Border Protection (see section 2.12 of Module One); or pending confirmation of the Health organisations ability to provide reasonable adjustment.
	Probation period : Details of any probation period, including probation review during and at the end of the period (see the Public Service Commission's <u>Managing for Performance – Guide for Managers</u> for further information on probation reviews) – for staff new to the NSW Health Service only.
Staff s	specialist recruitment – see also Section 3.1.1 of Module Two.



Appendix 1.13: Retention of recruitment and selection records

As required by State Archives and Records:

<u>General Retention and Disposal Authority for Administrative Records (GA28) – Personnel records</u>

(Unless otherwise indicated, all records should be kept in StaffLink Recruitment. E-signatures are accepted.)

Selection process information / documentation (including unsuccessful applications and any offers of employment not accepted)	✓	Minimum retention period
Advertisement and job information (incl. position/role description and selection criteria)		2 years after
 Recommendation Report or report of selection on other grounds (signed by approving officer) 		recruitment finalised, then
Eligibility list		destroy
Records of any internal process reviews		(But note differing
 Selection documentation for each unsuccessful applicant or applicant who has not accepted an offer of employment 		retention period for any criminal history
 Full application including resume, any written references and any other supporting information 		received in response to a NCRC).
Any supplementary information subsequently provided		, 110110).
 Any declarations and consent forms signed by the applicant (including any Health Declarations by any recommended applicants subsequently not employed *) 		
 Record of any verification of information and any relevant employment checks (including referee checks, validation of a Working With Children Check number, and a Service Check Register check) 		
Record of any National Criminal Record Check conducted on the applicant (together with a completed 100-point ID checklist), or any signed criminal history declaration Note: No details of an applicant's criminal history received as a response to a National Criminal Record Check are to be recorded or maintained within the recruitment system. Health organisations must destroy any criminal history record as soon as they have completed a risk assessment, or within 3 months at the latest.		
 For overseas applicants, copy of any overseas police certificate or signed statutory declaration 		
 For aged care applicants, copy of any signed statutory declaration 		
 Record of any risk assessments arising from a Service Check Register check or a National Criminal Record Check, and associated records * 		
 Any medical advice on an applicant's ability to carry out the inherent requirements of the position and any consequent decisions by the Health organisation * 		
 Copy of any advice provided to the applicant about the outcome of the selection process 		
2. Successful applications	✓	Minimum retention period
 Job information (including position / role description and selection criteria) 		75 years after date
Full application including resume and any written references		of birth or 7 years after employment
Completed confirmation of selection panel membership		ceases, whichever
	T .	
Record of information obtained via referee checks		is longer, then destroy.

^{*} Retain on a separate, confidential file kept in a secure location and accessible only to authorised staff.



Appendix 1.13 continued

Written advice by the Credentials (Clinical Privileges) Subcommittee / selection panel	75 years after date
about the determined clinical privileges / scope of practice for staff specialists	of birth or 7 years
Any medical advice about the applicant's ability to carry out the inherent requirements of the position *	after employment ceases, whichever is longer, then
Copy of letter of offer and/or other employment documentation (eg contract)	destroy.
Copy of acceptance of offer	accuracy.
Record of any documentation reviewed and verified, or other action taken to verify	(But note differing
claims by the applicant	retention period for
Record confirming citizenship / residency or working visa status	any criminal history received in
 Copy of registration / licence documentation and signed and dated record of verification of current professional registration / licence status directly with the relevant registration / licensing body 	response to the NCRC).
 Record of any relevant information (eg conditions or restrictions) obtained from the relevant registration body 	
Record of verification of the status of the applicant with the HCCC	
Record of any relevant information obtained from the HCCC and any risk assessment	
 Copies of any educational, trade or professional qualifications listed as selection criteria (for registered practitioners: only if not shown on the AHPRA website) 	
 Evidence of eligibility to practice as a medical specialist, within the meaning of the relevant NSW award or determination, where relevant 	
Evidence of medical indemnity cover, where required	
 For targeted positions, evidence of relevant characteristics (eg Aboriginality) 	
Evidence of length of experience where listed as a selection criterion	
 Evidence of appropriate immunisation status, where required 	
Signed Health Declaration *	
Dated Service Check Register status search result	
Records of any risk assessment and associated records arising out of a Service Check Register record *	
Records relating to employment checks requirements:	
Completed and signed 100-point ID Checklist form	
Signed consent form for National Criminal Record Check	
Criminal history declaration (if applicable)	
Overseas applicants – copy of overseas police certificate or signed statutory declaration	
Aged care positions – copy of signed statutory declaration	
 Record of a National Criminal Record Check clearance screening validation number obtained from the Employment Screening and Review Unit's (ESRU) lodgement database, incl. date undertaken 	
 Any records relating to a risk assessment arising from a National Criminal Record Check (incl. correspondence from ESRU, contact with applicant, recommendations and outcomes) * 	
Note: No details of an applicant's criminal history received as a response to a National Criminal Record Check are to be recorded or maintained within the recruitment system. Health organistions must destroy any criminal history record as soon as they have completed a risk assessment, or within 3 months at the latest.	

^{*} Retain on a separate, confidential file kept in a secure location and accessible only to authorised staff.



Appendix 1.13 continued

 Any required Working With Children Check number obtained from the NSW Office of the Children's Guardian, records of the applicant's full name, the check number and date, outcome of the check validation, the clearance expiry date, and outcome of probity flag. 		
3. Information that, as a minimum, must be placed in the successful applicant's StaffLink record	√	Minimum retention period
Position / role description (including selection criteria)		75 years after date of birth or 7 years after employment ceases, whichever is longer, then destroy.
Job demands checklist		
Citizenship / residency / working visa status/details (including expiry date), if applicable		
Registration / license details (including any conditions and expiry dates), if applicable		
Evidence of eligibility to practice as a medical specialist within the meaning of the relevant NSW award or determination, as relevant.		
Evidence of medical indemnity cover, where required		
Copy of letter of offer and/or other employment documentation (eg contract)		
Check result status, validation date and expiry date for any Working With Children Check or National Criminal Record Check/Aged Care Check, as applicable.		

^{*} Retain on a separate, confidential file kept in a secure location and accessible only to authorised staff.



MODULE TWO

1 BACKGROUND

1.1 About Module Two

Module Two outlines the additional, modified or differing requirements that apply to recruiting and selecting staff specialists / clinical academics and determining their clinical privileges / scope of clinical practice.

Module One remains the primary source of mandatory requirements for all recruitment and selection for employment in the NSW Health Service.

1.2 Relationship to other modules

Refer to Module One.

1.3 Legislative, industrial and policy framework

Refer to Module One.

1.4 StaffLink Recruitment and Onboarding system

Refer to Module One.

<u>However</u>, any references to the StaffLink Recruitment and the Onboarding system, or requirements to record information in it, do not apply to Health organisations in which senior medical and dental recruitment has not yet migrated to this system.

1.5 Workforce targets

Refer to *Module One*.

1.6 Definitions

Refer to Module One.

<u>In addition</u>, the following definitions are relevant to the recruitment and selection of staff specialist and clinical academics:

Area of Need: A medical position (not a geographical location) so designated by the NSW Ministry of Health, where the position meets certain criteria indicating a major difficulty in recruiting medical practitioners to it from within Australia. An 'Area of Need' status allows NSW Health organisations to recruit suitably qualified overseas-trained medical practitioners to a position.

By-laws: Sections 39, 60 and 63 of the <u>Health Services Act 1997</u> allow a NSW public health organisation, with the approval of the Secretary of NSW Health, to make by-laws. Such bylaws must not be inconsistent with the Act or the regulations.

Clinical Privileges/Scope of Clinical Practice: The kind of work (subject to any restrictions) that a NSW Health organisation determines an individual medical practitioner or dentist is

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allowed to perform at one or more of its facilities. Clinical privileges/scope of clinical practice are determined through a credentialing process, and are specific to an individual and the role delineation, resources, equipment and staff available in a single facility or group of facilities.

Credentials: Documented evidence of an individual's formal qualifications, training, experience and clinical competence.

Credentials (Clinical Privileges) Subcommittee: A committee established by the Medical and Dental Appointments Advisory Committee to provide advice on the clinical privileges to be given to an applicant or practitioner.

Interview Subcommittee: A committee commonly established by the Medical and Dental Appointments Advisory Committee to review all applications, select applicants for interview, interview suitable applicants, undertake referee checks, verify credentials and make recommendations regarding appointments.

Medical and Dental Appointments Advisory Committee (MDAAC): A committee of a NSW Health organisation that provides advice to the chief executive, or delegate, on the appointment of staff specialists and the clinical privileges that should be granted to them.

Medical practitioner: An individual registered as such under the <u>Health Practitioner</u> Regulation National Law (NSW).

Staff specialist: A medical practitioner employed as staff of the NSW Health Service under the *Staff Specialists (State) Award*. For the purposes of this Module only a staff specialist excludes post graduate fellows, who are covered by the requirements contained in Module One.

2 ADDITIONAL / DIFFERING RECRUITMENT AND SELECTION REQUIREMENTS

2.1 Identifying and managing vacancies

Refer to Module One.

2.2 Review position information

Refer to Module One.

2.2.1 Position / role description

Refer to Module One.

<u>However</u>, where senior medical and dental recruitment has not yet migrated to StaffLink Recruitment, use of the state-wide position / role description template is not mandatory.

2.2.2 Selection criteria

Refer to *Module One*.

2.3 Options for filling vacancies

Refer to Module One.

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<u>In addition</u>, staff specialists can be employed temporarily without advertising in the following circumstances:

- Employment does not exceed 3 months and
- The qualifications and experience of the staff specialist are determined to be suitable to the circumstances and
- Appropriate clinical privileges/scope of clinical practice are determined and
- Mandatory employment checking and verification occurs (see Appendix 2.1) and
- The exercising of the delegation to employ temporarily is subject to the advice of the

MDAAC, if the advice or recommendation of MDAAC is required (refer to the relevant Model or local by-laws).

2.4 Advertising requirements

Refer to *Module One*.

<u>However</u>, where senior medical and dental recruitment has not yet migrated to StaffLink Recruitment, vacancies advertised across NSW Health or beyond must be placed onto eRecruit, along with a link to the position information package.

2.5 Information to be provided to applicants

Refer to Module One.

<u>In addition</u>, information provided for staff specialist and clinical academic positions must include the requirement for the applicant to provide:

- A statement setting out what employment and clinical privileges / scope of clinical practice
 the applicant holds at any NSW Health organisation or other health service provider, and
 a statement setting out the clinical privileges / scope of clinical practice they now seek
- An authority to allow the MDAAC to obtain information about the applicant's past performance as a medical practitioner
- A statement regarding any current disciplinary proceedings.

Information packages must also provide information on the role delineation of the facility. This ensures applicants are aware of the conditions which relate to their employment.

2.6 Application management

Refer to Module One.

<u>In addition</u>, applications for permanent staff specialist positions, or for temporary positions over 3 months, must be in writing, and must be referred to the MDAAC, and in turn to a Credentials (Clinical Privileges) Subcommittee.

2.7 Selection panels

Refer to *Module One*.

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2.7.1 Composition of the selection panel (interview subcommittee)

Refer to **Module One** for basic requirements for all selection panels.

<u>However</u>, in staff specialist recruitment the MDAAC commonly establishes an interview subcommittee to manage the selection process. The composition of the panel will vary depending on the scope and nature of the position to be filled.

Interview subcommittees should include people with sufficient knowledge and understanding of the needs of the facility or facilities to which the proposed appointment relates, such as:

- A representative from the NSW Health organisation or facility management
- An independent from another NSW Health organisation, or if unable to identify a suitable person, a person independent of the facility or the reporting structure within which the position is placed
- A representative from the relevant clinical department
- A representative from the speciality/sub-specialty in which the clinical privileges/scope of clinical practice is sought
- A representative from the Medical Staff Council.

Where an interview subcommittee is combined with the Credentials Subcommittee, it must include a member of the MDAAC – refer to Section 2.8.6 of this Module.

2.7.2 Role of the convenor

In staff specialist recruitment, the convenor is responsible for ensuring that:

- The selection process meets all relevant NSW Health policy requirements as outlined in Module One and in this Module
- The required sign off occurs, confirming all critical actions have taken place, before the appointee commences (see <u>Appendix 2.1</u>).

2.7.3 Role of the independent

Refer to Module One.

2.8 Selection process

Refer to *Module One* for basic requirements for all selection processes.

<u>However</u>, in staff specialist recruitment the selection process will specifically include the following:

- Establishing a selection panel (interview subcommittee) to consider written applications to determine those applicants to progress through the selection process
- Further assessment of an applicant's suitability, usually via an interview process
- Conducting all mandatory checks and verifications
- Determining the clinical privileges/scope of clinical practice and
- Making a resulting recommendation to the chairperson of the MDAAC.

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The MDAAC will then make a recommendation to the decision maker.

2.8.1 The initial cull

Refer to Module One.

<u>However</u>, where senior medical and dental recruitment has not yet migrated to StaffLink Recruitment, the use of targeted questions will not be available, and any cull should be based on the selection criteria.

Similarly, the revised Recommendation Report template will not be available, and any disagreement must be documented in a minority report provided to the decision maker before continuing with the selection process.

2.8.2 Further assessment of shortlisted applicants (incl. Area of Need positions)

Refer to *Module One*.

<u>In addition</u>, for Area of Need positions, there should be a specific assessment of the applicant's clinical competence and / or medical knowledge.

2.8.3 Formal interviews

Refer to Module One.

In addition, see <u>Section 2.8.3.1</u> below.

2.8.3.1 Sight / collect or record details of mandatory documentation

Convenors must ensure that original documentation is sighted and details recorded at the time of the interview for the following:

- Documentation necessary to support the 100 Point ID Check the 100 Point ID Check form must be fully completed by the person sighting the documentation (see current NSW Health policy on <u>employment checks</u>)
- Proof of citizenship / residency or appropriate working visa status the details must be recorded on the 100 Point ID Check form
 - Note: In some limited circumstances, an overseas applicant may not be able to seek a visa without a conditional offer.
- Evidence of current professional registration / licence status, or eligibility for membership of the relevant state or national professional association, where applicable
 - <u>Note</u>: Current professional registration / licence / membership status must also be confirmed directly with the registering / licensing authority.
- Original documents confirming any educational, trade or professional qualifications or any
 educational requirements for the position (eg acceptance into a recognised training
 program) listed as selection criteria the originals must be copied, and the copies certified
 by the person who sighted them, and retained

<u>Note</u>: It is not necessary to sight qualifications used to gain registration, as this role is undertaken by the registering authority.

Note: If original tertiary qualifications (professional, academic or vocational) are unavailable, Health organisations may accept academic transcripts certified by the

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educational institution and including a statement that all requirements of the relevant course have been met.

<u>Note</u>: For overseas qualifications in a language other than English, where the original qualification is not available, the applicant must provide a transcript translated into English by an officially accepted state or commonwealth body, and certified as such (see *Multicultural NSW* or *Department of Immigration and Border Protection*).

- Evidence of length of experience, where listed as a selection criterion
 Note: In many instances, this can also be verified through referee checking.
- For child related work, the applicant's Working with Children Check number (if not already provided and if not subject to any exemptions – refer to the current NSW Health policy on employment checks)
- Evidence of relevant characteristics for identified or targeted positions (<u>Anti-Discrimination Act 1977</u>) / eligible persons (<u>Government Sector Employment Rule 26</u>), eg citing of Aboriginality (see also <u>Appendix 1.7</u> and <u>Appendix 1.8</u> of Module One),
- Evidence of the required immunisation status eg sight and copy NSW Health Vaccination Record Card, or collect New Recruit Undertaking / Declaration and TB Assessment.

The following must also be collected at interview:

- Signed NSW Health National Criminal Record Check consent form (with details checked against the 100 points of identification)
- For positions in aged care, the signed Commonwealth Aged Care Statutory Declaration
- Signed Health Declaration Form
 - <u>Note</u>: While the Health Declaration Form may be collected at interview it must only be considered once it is proposed to offer an applicant the position.
- Signed standard consent for employment related checks, where required
- Signed Authority to Prescribe, Supply, Dispense or Administer Prescribed Restricted Substances / Drugs of Addiction Form, where required.

In addition, the convenor must:

- Confirm details of two referees, one of whom is a current supervisor/manager
- Sight and check medical indemnity cover, where required
- Confirm eligibility to practice as a specialist or general practitioner, as relevant.

See also <u>Section 2.10</u> regarding mandatory checks and verifications and related assessments.

2.8.4 Determine preferred applicant(s) and any eligibility list

Refer to Module One.

2.8.4.1 Preferred applicant(s)

Refer to *Module One*.

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2.8.4.2 Eligibility lists

Refer to *Module One*.

2.8.5 Referee checks

Refer to Module One.

2.8.6 Determining clinical privileges / scope of practice

The MDAAC establishes a Credentials (Clinical Privileges) Subcommittee to advise it on matters concerning clinical privileges / scope of clinical practice, including those to be allowed to a person proposed for appointment as a staff specialist.

The relevant by-laws of the NSW Health organisation set out the functions and composition of the subcommittee. Its membership must include a medical practitioner from the relevant speciality / sub-speciality.

The clinical privileges / scope of clinical practice of a staff specialist must be determined as part of the recruitment and selection process. The staff specialist's ability to provide defined clinical services must be assessed and matched with the role delineation of the relevant facility, and the staffing, facilities, equipment and support services available at that facility.

The Credentials (Clinical Privileges) Subcommittee must therefore consider the following:

- The delineated role of the facility / facilities
- The clinical privileges / scope of clinical practice currently granted for the applicant in any other facility / facilities, and
- The position description, application, curriculum vitae and all other information submitted in support of the application.

The chairperson of the committee must sign off critical action items 2.1 and 2.2 of <u>Appendix 2.1</u>.

Interim clinical privileges / scope of clinical practice, granted as part of a temporary appointment, must be determined in consultation with a medical practitioner from the relevant speciality / sub-speciality, and approved by the Chief Executive or authorised decision maker.

For further information, see the current NSW Health policy on <u>delineation of clinical privileges</u> for Visiting Practitioners and Staff Specialists.

2.8.6.1 Area of Need applicants

The process for determining the clinical privileges / scope of clinical practice for Area of Need positions is the same as for permanent appointments. However, there is a difference in the registration of such applicants.

NSW Health agencies must submit the applicant's determined clinical privileges / scope of clinical practice to the Australian Health Practitioner Regulation Authority (APHRA) for assessment. APHRA may place restrictions on practitioners working in Area of Need positions. Health organisations must regularly assess and monitor compliance with any such conditions.

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2.8.6.2 Timing

There is no time requirement for referring applicants to the Credentials (Clinical Privileges) Subcommittee in the course of the recruitment and selection process.

The referral can be made prior to interview to ensure that an applicant who cannot undertake the role required by the facility is not recommended for appointment. In such case, the advice of the Credentials (Clinical Privileges) Subcommittee must be provided to, and considered by, the interview subcommittee.

Where the composition of the MDAAC or Interview Subcommittee and the Credentials (Clinical Privileges) Subcommittee is the same or substantially the same, the committees may convene consecutively.

2.9 Make recommendations

In staff specialist recruitment, any outstanding checks / verifications are usually completed before a recommendation is made. In all cases, all mandatory checks and verifications must be completed before any offer of employment is made.

Refer to <u>Section 2.10</u> Mandatory checks and verifications and related assessments for further information about the required checks.

2.9.1 Recommendation Report (Selection Report)

Once all necessary verification activities and referee checks have been undertaken and assessed, the clinical privileges / scope of clinical practice determined, and the preferred applicant(s) confirmed, the Interview Subcommittee and the Credentials (Clinical Privileges) Subcommittee must provide a report to the Chairperson of MDAAC identifying:

- Those involved in making the recommendations
- Material available to those making the recommendations
- The final recommendations and the basis on which they were made.

As part of this process the following information must be available to the MDAAC upon request:

- Number of positions advertised
- Number of applicants for each position
- Position description, advertisement and selection criteria
- All applications
- Outcomes of the verification activities for the recommended applicants eg referee reports
- The proposed clinical privileges / scope of clinical practice.

The Chairperson of MDAAC in turn makes a recommendation to the Chief Executive or the delegated decision maker on the preferred applicant(s) and on any eligibility list created. The Chairperson must also complete the relevant sections of <u>Appendix 2.1</u> confirming that the required critical actions have been undertaken.

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2.9.2 Alternative recommendations

If a selection panel is unable to reach a unanimous decision, information about any differing views must be submitted to the decision maker along with the panel's final report. This information may include alternative recommendations, where appropriate.

2.9.3 Approving the recommendation

Refer to Module One.

2.10 Mandatory checks and verifications and related assessments

Before any offer of employment Health organisations must verify all information provided by the recommended applicant and complete all mandatory employment checks relevant to the position in line with relevant policies.

All relevant information about the applicant's qualifications, experience and registration status and past performance must be appropriately and independently verified. A selection committee member's past knowledge of an applicant is not sufficient to meet the requirements reflected in Module One or this Module.

In staff specialist recruitment, <u>Appendix 2.1</u>, Critical Actions Compliance Declaration, outlines the critical information that must be verified for permanent employment or temporary employment <u>over</u> one week (for temporary employment <u>under</u> 1 week, refer to <u>Section 2.10.3</u> of this Module). The relevant sections of the Declaration must be completed by the Convenor (or in the case of temporary employment, the delegated authority), the Chair of the Credentials Subcommittee, the Chair of MDAAC and the authorised decision maker.

The outcomes of the checks must be assessed and any appropriate risk management action, as required by the relevant policies, taken prior to a formal job offer. Refer also to the current NSW Health policies on <u>service check register</u> and <u>employment checks</u>.

Contact with the Health Care Complaints Commission (HCCC) should also be made, at a minimum, if the selection panel forms a concern that a complaint about an applicant has recently been made.

Where the registration status includes conditions, including any restrictions to the applicant's authority to prescribe, supply, dispense or administer substances listed in Schedule 4(d) and / or Schedule 8 of the Poisons List proclaimed under the *Poisons and Therapeutic Goods Act 1966*, these must be assessed to determine the ability of the applicant to undertake the duties of the position, and the ability of the NSW Health organisation to accommodate the conditions (eg provide the necessary supervision etc).

If an applicant has declared a restriction on their authority to prescribe, supply, dispense or administer substances listed in Schedule 4(d) and / or Schedule 8 of the Poisons List proclaimed under the *Poisons and Therapeutic Goods Act 1966*, but these are not reflected in their registration conditions, the details of the restrictions should be confirmed or checked with the Ministry of Health's Pharmaceutical Regulatory Unit so that the nature of the restrictions can be adequately understood and assessed. Contact details for the Unit can be found at http://www.health.nsw.gov.au/pharmaceutical/Pages/wda.aspx.

Where an applicant, upon appointment, is going to rotate across facilities, each individual facility needs to be aware of the conditions and the facility's capacity to accommodate them.

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Any conditions must be documented and compliance monitored. See also the current NSW Health policy on *medical practitioners' compliance with registration conditions*.

When checking for any history of complaints against an applicant or any professional performance issues with the HCCC or the registration authority, information should be sought on whether there is any pending disciplinary action involving the applicant and the outcomes of any formal disciplinary investigations.

Where the applicant has previous substantiated allegations, or disciplinary action is pending, a risk assessment should be conducted to determine if there is an unacceptable risk for the NSW Health organisation in appointing the applicant.

Where a risk assessment determines that the risk posed to the NSW Health organisation is significant this information must be used as part of the decision making process. The documented risk assessment must also be provided to the decision maker.

2.10.1 Health assessment

Refer to Module One.

2.10.2 Australian citizenship / residency considerations

Refer to *Module One*.

2.10.3 Temporary employment under 1 week

For temporary appointments not exceeding one week, the Chief Executive or authorised decision maker must verify prior to the commencement of duties that:

- The 100-point Identification Check has been completed and citizen/residency/visa status confirmed as appropriate
- A National Criminal Record Check has been undertaken, and where required, a risk
 assessment completed (unless a decision has been taken that one is not required refer
 to the current NSW Health policy on employment checks)
- A Working with Children Check clearance has been verified with the Children's Guardian (unless an exemption applies – refer to the current NSW Health policy on <u>employment</u> <u>checks</u>)
- Registration status has been confirmed directly with the Australian Health Practitioners Regulation Agency, and any practice conditions identified
- Evidence of medical indemnity cover has been sighted, where required
- At least one referee check has been conducted
- A check against the NSW Health Internal Service Check Register has been carried out, and where necessary a risk assessment has been completed
- A specialist in the relevant specialty was involved in determining the scope of practice.

Section 1.1 to 1.9 of the Critical Actions Compliance Checklist (<u>Appendix 2.1</u>) must be completed and the Declaration signed by the Chief Executive or authorised decision maker.

Where an appointment originally planned for one week only is subsequently extended beyond one week, Section 1.1 to 1.14 of the Critical Actions Compliance Checklist (*Appendix 2.1*) must

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be completed. However, refer to <u>Section 2.10.4</u> below for requirements for re-verifying information.

2.10.4 Re-verifying information for further temporary employment

Other than criminal record checks, initial checks do not need to be repeated for further temporary employment (beyond one week) of someone who has already undergone the mandatory checks as part of the previous temporary employment **unless**:

- There is a gap of more than three months between the two temporary periods
- There is reason to suggest that any relevant circumstances of the individual have changed.

2.10.5 Emergency situations

In a genuine emergency situation it may be possible to commence someone prior to completion of the employment checks (see the current NSW Health policy on <u>employment checks</u>).

If the referee check with a current employer cannot be completed in an emergency situation prior to a shift commencing, but **registration status and identification have been verified**, the matter should be escalated to the Chief Executive, who may approve the appointment. The referee check must then be completed as soon as possible, and the appropriateness of the appointment confirmed and documented.

2.11 Preference matching in bulk recruitment campaigns

Refer to *Module One*.

2.12 Make the formal job offer

Refer to <u>Module One</u> for basic requirements for formal job offers.

<u>However</u>, in staff specialist recruitment, a formal job offer may only be made to the recommended applicant(s) once all mandatory requirements outlined in Module One and this module have been met, and the Chief Executive or delegated decision maker has completed the relevant sections of the Critical Actions Compliance Checklist (*Appendix 2.1*).

Note: staff specialist offer letters are currently managed offline.

For appointment requirements refer to Section 3 of this Module.

Health organisations must not offer permanent employment to overseas trained medical practitioners in positions granted Area of Need status. An Area of Need status is for a time limited period only, and an extension cannot be guaranteed regardless of whether the position is occupied.

The letter of offer and any employment documentation to an overseas trained medical practitioner appointed to an Area of Need position must state that the position is temporary only. The contract duration must not be greater than the life of the existing Area of Need certificate.

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Health organisations should also be aware that the Australian Health Practitioner Regulation Authority may require overseas trained medical practitioners to undertake a Pre-Employment Structured Clinical Interview (PESCI) as part of the registration process.

2.12.1 Employment documentation

Refer to Section 3.1.1 of this Module.

2.12.2 Where an offer is declined

Where the recommended candidate declines the offer, Health organisations may use any eligibility list created to fill the vacancy. Before making any offer of employment to the next ranked applicant on the eligibility list, all critical actions outlined in <u>Appendix 2.1</u> must have been completed.

2.13 Advise unsuccessful applicants

Refer to *Module One*.

However, Recruitment Pools are currently not available for staff specialist recruitment.

2.14 Post-selection feedback

Refer to Module One.

2.15 Retention of records

Health organisations must retain all recruitment and selection records for staff specialists / clinical academics in line with <u>Appendix 2.2</u> in order to meet the requirements of State Archives and Records around minimum retention periods for government records.

Note: Certain information / documentation must also be placed on the successful applicant's personnel file (as outlined in *Appendix 2.2*).

In accordance with the <u>Privacy and Personal Information Protection Act 1998</u>, selection panels and all other staff involved in managing the recruitment and selection process must treat all personal information about the job applicants confidentially. All records must be stored securely.

2.16 Complaints management: internal review

Refer to *Module One*.

2.17 Commencing work

Refer to Module One.

<u>In addition</u>, any performance agreement must also comply with the requirements of the *Staff Specialists (State) Award* (available at

http://www.health.nsw.gov.au/careers/conditions/Pages/default.aspx).

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3 EMPLOYMENT

3.1 Employment of staff specialists

Staff specialists are employed as staff of the NSW Health Service. Their employment terms and conditions must be consistent with the provisions of the *Staff Specialists (State) Award* (available at http://www.health.nsw.gov.au/careers/conditions/Pages/default.aspx).

A NSW Health organisation must not, without specific approval from the Secretary, offer staff specialists remuneration or conditions of service other than in accordance with the *Staff Specialists (State) Award*, the *Staff Specialists Determination* and any non-standard terms and conditions approved by the Ministry of Health.

3.1.1 Employment documentation

All offers of employment as staff specialists are to be in writing, and specifically exclude any collateral agreements or undertakings not set out in writing.

Care should be taken in preparing employment documentation to ensure that any arrangements which do not form part of the ongoing terms and conditions of employment are mentioned in a way that makes it clear that they are not to be regarded as ongoing entitlements. Employment documentation must expressly provide that the employment is conditional on satisfactory national criminal record and/or working with children checks.

Employment documentation for staff specialists must also have attached a position / role description and include a condition that requires staff specialists to inform the NSW Health organisation in the event of a notification of a matter concerning him or her to the NSW Health Care Complaints Commission or the Medical Board of Australia, the imposition of orders or conditions affecting their registration and / or any restrictions on clinical privileges or practice imposed by another health care organisation.

All staff specialists' employment documentation must also state that they are required to be available for reasonable on call and recall outside their normal duties, as may be required, and at these times be readily contactable and be able and prepared to attend the facility within a reasonable time.

In addition, the information identified in <u>Appendix 1.12</u> of Module One must, as a minimum, be included in the offer of employment.

Acceptance of the terms of employment is to be evidenced by signing a copy of the letter of employment.

3.1.2 Employment arrangements

Staff specialists can be employed in a part time or full time capacity. Part-time staff specialists must complete a written part-time arrangement as provided for in the Award.

A staff specialist is required to elect a private practice level arrangement, consistent with the provisions of the *Staff Specialist Determination* (as amended from time to time). Remuneration arrangements will be affected by which level is chosen.

Staff specialists are usually appointed at the year 1 grade and progress to the next incremental step on the anniversary date of their appointment. This differs for part-time staff specialists who will progress to the next incremental step at the completion of the equivalent of a full time year,

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unless they provide evidence of outside practice that is acceptable to the NSW Health organisation.

However, having regard to the skills, experience and performance of a staff specialist, an initial appointment can be made at a higher level or there can be accelerated progression through the steps.

3.1.3 Professional indemnity insurance for staff specialists

A person is not entitled to practice in NSW as a medical practitioner unless covered by approved professional indemnity insurance. While this requirement does not apply to a medical practitioner who is an employee of a NSW Health organisation it does have application in relation to the exercising by staff specialists of their rights of private practice, as follows:

- Level 1 staff specialists (ie those who have elected to assign the proceeds of their private practice to the employer) are indemnified through the Treasury Managed Fund against liability for acts or omissions committed in the course of treating private patients subject to certain conditions (such as that serious and wilful misconduct is not involved).
- Level 2 to 5 staff specialists must arrange for their own indemnity cover in respect of
 private patients who are treated pursuant to the rights of private practice arrangements.
 However the costs of obtaining medical indemnity insurance cover, relating to the exercise
 of rights of private practice only, are able to be reimbursed from the No 1 Account. In
 addition, Level 2 to 5 staff specialists who treat private patients in rural public hospitals or
 who treat private paediatric patients in public hospitals are entitled to sign a contract of
 liability coverage with the NSW Health organisation to provide indemnity coverage in
 respect of services provided to such patients.

See the current NSW Health policy on <u>rights of private practice arrangements</u> (including medical indemnity).

3.2 Appointment of clinical academics

A medical practitioner who is employed as a member of staff of a university's school of medicine and provides clinical and associated administrative services for public patients in public hospitals, for more than 8 hours a week on average (except where on approved leave) may be offered secondary employment as a clinical academic within the NSW Health Service, in addition to his or her primary employment with a university.

The NSW Health organisation should approve any proposal to create an academic position where appointment as a clinical academic working in the NSW Health is contemplated. The NSW Health organisation should discuss with the university how the clinical skills and the non-clinical responsibilities of a proposed clinical academic appointment relate to the clinical needs and priorities of the NSW Health agencies.

There should be prior written agreement between the NSW Health organisation and the university about the clinical role envisaged for a proposed position.

Any offer of employment as a clinical academic within a NSW Health organisation is at the discretion of the Chief Executive or delegate.

For further information, refer to the current NSW Health policy on <u>clinical academics employed</u> <u>in the NSW Health Service</u>.

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3.2.1 Selection process

Prior to the commencement of a clinical academic's appointment in a NSW Health organisation, all screening and verification actions, as required by NSW Health policies must occur. To facilitate a co-operative approach it has been agreed with the NSW universities that a NSW Health organisation should usually be represented on the selection panel for a position that is intended to involve a clinical academic appointment in a NSW Health organisation.

3.2.2 Information packages

Refer to <u>Section 2.5</u> of Module One and <u>Section 2.5</u> of Module Two regarding information to be provided to potential applicants.

3.2.3 Referee checking and verification of all mandatory information

The NSW Health organisation's representative is responsible for ensuring that all the required referee checking, screening and verification of information (refer to Sections <u>2.8.3.1</u>, <u>2.8.5</u> and <u>2.10</u> of this Module) and determination of clinical privileges (refer to <u>Section 2.8.6</u> of this Module) occurs prior to the clinical academic commencing any clinical activities for or on behalf of the NSW Health organisation.

Referee checking must be undertaken by a person or persons with adequate clinical expertise to interpret and explore the relevant clinical performance and competence required by the selection criteria.

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4 LIST OF APPENDICES

Module Two is supported by Appendices as follows:

Number	Title
Appendix 2.1	Critical Actions Compliance Declaration
Appendix 2.2	Retention of recruitment and selection records

These Appendices are attached at the end of this Module, and can also be accessed as separate documents on the NSW Health intranet site at

http://internal.health.nsw.gov.au/jobs/recruitment/index-recruit.html.



Appendix 2.1: Critical Actions Compliance Declaration

	Staff specialist and clinical academic appointment procedures: Critical Actions Compliance Declaration			
Task D	escription	√		
1.	Chair, Interview Subcommittee must confirm all critical actions, or			
	Authorised Decision Maker, who is approving a short-term temporary appointment over one week but lest than 3 months, must confirm critical actions 1.1 to 1.14, <u>or</u>	ss		
	Authorised Decision Maker, who is approving a short-term temporary appointment of less than one week must confirm critical actions 1.1 to 1.8.	۲,		
1.1	Identity of appointee was verified and details recorded on the 100-point Identification Checklist in accordance with the current NSW Health policy on <i>employment checks</i> .			
1.2	NSW Health National Criminal Record Check form has been collected in accordance with the current NSW Health policy on employment checks .			
1.3	Working with Children Checks clearance number has been provided and verified with the Office of the Children's Guardian (or the person has been appointed subject to the need to provide a valid Working With Children Check clearance number within five days of commencement of work) in accordance with the current NSW Health policy on employment checks .			
1.4	Registration, including existence of any conditions on registration, was verified independently through the AHPRA website.			
1.5	Evidence of medical indemnity cover has been sighted and checked, where required.			
1.6	A check of the NSW Health internal Service Check Register has been undertaken and any risk assessment completed as required in accordance with the current NSW Health policy <u>Service Check Register</u> .			
1.7	At least two reference checks were conducted (one reference check can be sufficient for appointments of less than 3 months).			
1.8	A specialist in the relevant specialty was involved in determining the clinical privileges/scope of practice where appointment is no more than 3 months, with an extension for one further single 3 month period where required.			
1.9	Eligibility to practise as a medical specialist, within the meaning of the Staff Specialists (State) Award, has been verified.			
1.10	Written details of all other current medical appointments, and a signed standard consent form "Employment Related Checks" has been collected (if not completed in E-recruit).			
1.11	Original documentation, or if not practicable, original certified copy of any additional qualifications (ie additional to those used to gain registration and/or shown on the AHPRA website), memberships, certificates etc used to support claim for the position was sighted, copied and certified.			
1.12	Where verbal references were obtained, responses to the specified questions were recorded in writing.			
1.13	Where written references were obtained, identity and relationship to appointee was directly confirmed, and written responses addressed the specified questions.			
1.14	Contact was made with the Health Care Complaints Commission and/or Australian Medical/Dental Board where further information was deemed necessary as part of the selection process.			
1.15	All members of the selection panel had access to the entire written application, CV and supporting documentation for each applicant under consideration.			
1.16	The selection panel included a medical practitioner from the speciality/sub-specialty in which privileges were sought.			
1.17	The convenor of the selection panel has completed recruitment and selection training.			
I confirr to the p	m that the above occurred prior to the commencement at work of (name of appointee) osition of in (name of NSW Health Organisation)			
	appointment:			
) (Title)			
	ure) (Date)			

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Appendix 2.1 continued

Staff specialist and clinical academic appointment procedures: Critical Actions Compliance Declaration			
Task	Description	✓	
2.	Chair, Credentials (Clinical Privileges) Subcommittee must confirm the following:		
2.1	The Credentials (Clinical Privileges) Subcommittee membership included a medical practitioner from the specialty or sub-specialty in which privileges were determined.		
2.2	The Credentials (Clinical Privileges) Subcommittee considered all of the information provided, and was satisfied that the information was sufficient to recommend that the attached clinical privileges/scope of clinical practice be granted.		
I confirm that the above occurred in determining that the attached clinical privileges/scope of clinical practice be granted to the recommended applicant.			
(Name) (Title)			
(Signa	(Signature) (Date)		

Task	Description	\checkmark
3.	Chair, Medical and Dental Appointments Advisory Committee must confirm the following (required where appointment is for more than 6 months):	l
3.1	All members of MDAAC had access to the entire written application, CV and supporting documentation for each applicant under consideration.	
3.2	In recommending the attached appointment and associated clinical privileges/scope of clinical practice, MDAAC considered the information and advice provided by its subcommittees, and is satisfied that the appointee underwent all necessary checks, and is a fit and proper person to be appointed to the position.	
3.3	Appropriate consideration has been given to any issues arising out of the check of the NSW Health Service Check Register.	
3.4	Appropriate consideration has been given to any issues identified in any risk assessment report arising out of a National Criminal Record Check.	
Name) (Title)	
(Signa	ature) (Date)	



Appendix 2.1 continued

Staff specialist and clinical academic appointment procedures: Critical Actions Compliance Declaration

As the Decision maker (Chief Executive or Delegate) (required where appointment is for more than 6 months), I confirm that:

- I have been able to have access to the entire written application and all supporting documentation for all applicants under consideration for the position.
- I was provided with written advice from the MDAAC that set out the grounds for the decision leading to the recommended appointment and determination of clinical privileges/scope of clinical practice.

In approving the appointment of the recommended applicant, I confirm that:

- All employment related checks have been conducted.
- Indemnity coverage has been checked (if required).
- The recommended applicant and proposed clinical privileges/scope of clinical practice were determined in line with the key requirements of Module Two of the current NSW Health policy on recruitment and selection of staff of the NSW Health Service.

Decision maker:	
Name)	(Title)
(Signature)	(Date)

All appropriate signature blocks must be completed prior to the staff specialist/clinical academic commencing appointment in the NSW Health organisation. The completed document must be placed on the appointee's Personnel File, and a copy kept with appointment papers if they are retained separately.

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Appendix 2.2: Retention of recruitment and selection records

As required by State Archives and Records:

<u>General Retention and Disposal Authority for Administrative Records (GA28) – Personnel records</u>

(Records can be hard copy or electronic.)

1. Selection process information / documentation (including unsuccessful ✓ Minimum			
applications and any offers of employment not accepted)	•	retention period	
 Advertisement and job information (incl. position/role description and selection criteria) 		2 years after	
 Recommendation/selection report or report of selection on other grounds (signed by approving officer), including a completed Critical Actions Compliance Declaration 		recruitment finalised, then	
Eligibility list		destroy	
Records of any internal process reviews		(But note differing	
 Selection documentation related to each unsuccessful applicant or applicant who has not accepted an offer of employment 		retention period for any criminal history	
 Full application including resume, any written references and any other supporting information 		received in response to a NCRC).	
Any supplementary information subsequently provided			
 Any declarations and consent forms signed by the applicant (including any Health Declarations by any recommended applicants subsequently not employed *) 			
 Record of any verification of information and any relevant employment checks (including referee checks, validation of a Working With Children Check number, and a Service Check Register check) 			
Record of any National Criminal Record Check conducted on the applicant (together with a completed 100-point ID checklist), or any signed criminal history declaration Note: No details of an applicant's criminal history received as a response to a National Criminal Record Check should be recorded or maintained with selection documentation. Any criminal history record obtained as part of the selection process must be destroyed as soon as risk assessment is completed, or within 3 months at the latest.			
 For overseas applicants, copy of any overseas police certificate or signed statutory declaration 			
 For aged care applicants, copy of any signed statutory declaration 			
 Record of any risk assessments arising from a Service Check Register check or a National Criminal Record Check, and associated records * 			
 Any medical advice to the employer regarding an applicant's ability to carry out the 			
inherent requirements of the position and any consequent decisions by the employer *			
 Copy of any advice provided to the applicant re the outcome of the selection process 			
2. Successful applications	✓	Minimum retention period	
Job information (including position / role description and selection criteria)		75 years after date	
Full application including resume and any written references		of birth or 7 years after employment	
Completed confirmation of selection panel membership		ceases, whichever	
Written record of information obtained via referee checks		is longer, then	
Written record of past performance checks and any significant findings		destroy.	

^{*} Retain on a separate, confidential file kept in a secure location and accessible only to authorised staff.



Appendix 2.2 continued

Appropriately signed Critical Actions Compliance Declaration (see Appendix 2.1)	75 years after date
Written advice by the Credentials (Clinical Privileges) Subcommittee / selection panel regarding the determined clinical privileges/scope of practice for staff specialists	of birth or 7 years after employment ceases, whichever
Any medical advice to the employer regarding the applicant's ability to carry out the inherent requirements of the position *	is longer, then destroy.
Copy of letter of offer and/or other employment documentation (eg contract)	,
Copy of signed returned letter of offer	(But note differing
Record of any documentation sighted or communication undertaken to verify claims by the applicant	retention period for any criminal history received in
 Documentation confirming citizenship/residency or working visa status (included in the 100 point ID checklist form – see under records relating to employment checks requirements) 	response to the NCRC).
 Copy of registration / licence documentation and record of verification of current professional registration / licence status directly with the relevant registration / licensing body 	
 Record of any relevant information (eg conditions or restrictions) obtained from the relevant registration body 	
 Record of verification of the status of the applicant with the HCCC 	
 Record of any relevant information obtained from the HCCC and any risk assessment 	
 Record of verification of any educational, trade or professional qualifications listed as selection criteria (only if not shown on the AHPRA website) 	
 Evidence of eligibility to practice as a medical specialist, within the meaning of the relevant NSW award or determination 	
Evidence of medical indemnity cover	
 For identified or targeted positions, evidence of relevant characteristics (eg Aboriginality) 	
Evidence of length of experience where listed as a selection criterion	
Evidence of appropriate immunisation status	
Evidence that the applicant consented to:	
 Information being obtained from HCCC and/or relevant registration body 	
Other employment checks ie past performance checks being conducted	
Signed health declaration form or electronic declaration (if relevant) *	
Date stamped print-out of the Service Check Register status search result	
Records of any risk assessment and associated records arising out of a Service Check Register record *	
Records relating to employment checks requirements:	
Completed and signed 100-point ID Checklist form	
Signed consent form for National Criminal Record Check	
Criminal history declaration (if applicable)	
Note: If criminal history is indicated, the declaration must be maintained with the risk assessment documents. *	

^{*} Retain on a separate, confidential file kept in a secure location and accessible only to authorised staff.



Appendix 2.2 continued

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 Overseas applicants – copy of overseas police certificate or signed statutory declaration Note: If criminal history is indicated, the declaration must be maintained with the risk 		
assessment documents *		
 Aged care positions – copy of signed statutory declaration Record of a National Criminal Record Check clearance screening validation 		
number obtained from the Employment Screening and Review Unit's (ESRU) lodgement database, incl. date undertaken.		
 For Working With Children Check numbers obtained from the Children's Guardian, records of the applicant's full name, the check number and date, outcome of the check validation, the clearance expiry date, and outcome of probity flag. 		
 Any records relating to a risk assessment arising from a National Criminal Record Check (incl. correspondence from ESRU, contact with applicant, recommendations and outcomes) * 		
Note: No details of an applicant's criminal history received as a response to a National Criminal Record Check should be recorded or maintained with selection documentation. Any criminal history record obtained as part of the selection process must be destroyed as soon as a risk assessment is completed or within 3 months at the latest.		
3. Copies of documentation that, as a minimum, must be placed on the successful applicant's Personnel File	√	Minimum retention period
Position / role description		75 years after date
Selection criteria		of birth or 7 years
Completed confirmation of selection committee membership		after employment ceases, whichever
Completed and signed 100-point ID Checklist form		is longer, then
Documentation confirming citizenship/residency or working visa status (ie the completed 100-point ID Checklist form)		destroy.
Copy of registration / licence documentation and signed and dated record of verification of current professional registration / licence status (including any conditions) directly with the relevant registration/licensing body		
Evidence of eligibility to practice as a medical specialist within the meaning of the relevant NSW award or determination		
Evidence of medical indemnity cover		
Evidence of appropriate immunisation status		
File reference to confidential file containing the signed health declaration form or electronic declaration (if applicable)		
Copy of letter of offer and/or other employment documentation (eg contract)		
Evidence that the appointment was approved by the appropriately delegated authority (copy of letter of offer is adequate if signed by the appropriately delegated authority)		
Signed consent form for National Criminal Record Check		
Overseas applicants – copy of overseas police certificate or signed statutory declaration Note: Any criminal history obtained as part of the selection process must be shredded as soon as a risk assessment is completed, or within 3 months at the latest.		
Aged care positions – copy of signed statutory declaration		
Record of screening validation number obtained from the Employment Screening and Review Unit's lodgement database, and Working With Children Check number obtained from the Children's Guardian.		

^{*} Retain on a separate, confidential file kept in a secure location and accessible only to authorised staff.

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