Recruitment and Selection of Staff to the NSW Health Service

Summary  The purpose of this Policy Directive is to promulgate mandatory standards to be applied when recruiting and selecting staff for employment in the NSW Health Service. Module 1 sets out mandatory standards for the recruitment and selection of all staff. Module 2 outlines additional or differing standards for staff specialists and clinical academics. Module 4 outlines additional or differing standards for the junior medical officer annual recruitment campaign.

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Distributed to  Public Health System, Divisions of General Practice, Health Associations Unions, NSW Ambulance Service, Ministry of Health, Tertiary Education Institutes
Audience  Staff undertaking recruitment and selection actions or participating on a selection panel

Secretary, NSW Health
This Policy Directive may be varied, withdrawn or replaced at any time. Compliance with this directive is mandatory for NSW Health and is a condition of subsidy for public health organisations.
RECRUITMENT AND SELECTION OF STAFF TO THE NSW HEALTH SERVICE

PURPOSE

The purpose of this Policy Directive is to promulgate mandatory standards to be applied when recruiting and selecting staff for employment in the NSW Health Service. Meeting the mandatory standards will ensure that:

- All appointees have the appropriate knowledge, competence, skills, qualifications, and professional registration as required, and
- Service delivery needs are able to be met in a timely manner.

MANDATORY STANDARDS

Mandatory standards for the recruitment and selection staff of the NSW Health Service are arranged in the form of Modules, which are attached to this Policy Directive.

The primary module, Module One, outlines the mandatory standards that must be met for all recruitment and selection in the NSW public health system, unless otherwise specified.

Module Two outlines additional or modified standards for the recruitment and selection of staff specialists and clinical academics. Module Three has been rescinded. Module Four outlines the additional or modified standards for the Junior Medical Officer Annual Recruitment Campaign.

Failure to comply with mandatory standards will be managed in accordance with current NSW Health policy for managing misconduct.

Modules are supported by a range of tools, which are included in the relevant module as appendices. Appendices include sample forms and letters, implementation checklists, compliance checklists and process flowcharts.

IMPLEMENTATION

Chief Executives are required to:

- Ensure that the standards 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 and facilitate the appropriate delegations, include the delegations in their public 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 and
- Lead by example ensuring they only approve appointments where all relevant mandatory standards have been met.
**Policy Statement**

**Directors of Workforce/Human Resources** are required to:

- Promote and support mandatory recruitment and selection standards.
- Ensure provision of instruction, information and training as necessary to support effective implementation of the standards.
- Monitor compliance with mandatory standards and assume responsibility for the medical recruitment function.

**Convenors of selection panels** are required to:

- Ensure all relevant mandatory recruitment and selection standards are followed and all the required checking and screening actions occur and are appropriately documented.
- Ensure they have completed recruitment and selection training.

**HealthShare Services Centres** are required to:

- Provide recruitment and selection transactional services which are consistent with the mandatory standards.

**All staff** are required to:

- Comply with all relevant mandatory recruitment and selection standards.

**Revision History**

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<td>- Updated advice on approval to engage recruitment companies (Mod 1)</td>
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**ATTACHMENTS**

1. Module 1 - Recruitment and Selection of Staff of the NSW Health Service
2. Module 2 - Recruitment and Selection of Staff of the NSW Health Service - Additional Standards for Staff Specialists and clinical academics
3. Module 3 – RESCINDED - Recruitment and Selection of Staff of the NSW Health Service - Additional Standards for Security Staff (Pre-Employment Screening)
4. Module 4 - Recruitment and Selection of Staff of the NSW Health Service – Additional Standards for Junior Medical Officer Annual Recruitment Campaign.
Recruitment and Selection of Staff to the NSW Health Service

MODULE 1

Issue date: August-2015
PD2015_026
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1 BACKGROUND

1.1 About this document

The standards outlined in Module One apply to filling an identified vacancy in the NSW Health Service, except for:

- Casual employment, which refers to persons who may be employed on short term basis 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*
- Health Executive Service appointments and
- Where the requirements in this Module differ to those contained in a relevant additional Module. If this is the case it will be noted at the relevant point in Module One.

*Casual and temporary staff must be assessed to ensure their suitability to perform the required duties and have their competence, qualifications and registration verified (see Appendix 1.1 for mandatory standards).

1.2 Relationship to other modules

As well as the requirements specified in Module One, certain professional groups have additional, modified or differing standards that must be met when filling a position in that particular group. Before any recruitment and selection processes commence, additional Modules must be checked to determine whether further requirements exist for the position being filled. Where they do exist, the relevant standards in Module One and the additional Module must be met.

1.3 Legislative, industrial and policy framework

1.3.1 Relationship to industrial awards

When filling vacancies, the applicable industrial award or determination must also be considered. Should standards in this or another Module differ from the conditions set out in a particular award or determination, the award/ determination conditions will take precedence.

Clause 53 (Reasonable Workloads for Nurses) of the Public Health System Nurses’ and Midwives (State) Award requires NSW Health to allocate reasonable workloads to nurses. Recruitment processes must be undertaken in a manner that ensures ongoing compliance with that obligation.


1.3.2 Relationship to other policies

As far as practicable all recruitment and selection related policy requirements have been incorporated into this Policy Directive. However a small number of other key, subject specific policies (as amended from time to time) will need to be considered alongside this Module, as identified below:
Recruitment and Selection of Staff to the NSW Health Service

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• Respecting the Difference: An Aboriginal Cultural Training Framework for NSW Health (PD2011_069)
• Definition of an Aboriginal Health Worker (IB2014_001)
• Code of Conduct – NSW Health (PD2012_018)
• Employment Health Assessment (PSC D2001_001)
• Employment Checks: Criminal Record Checking and Working with Children Checks (PD2013_028)
• Injury Management and Return-to-Work Policy (PD2013_006)
• Locum Medical Officers - Employment and Management (PD2013_022)
• Managing Excess Staff of the NSW Health Service (PD2012_021)
• Medical Practitioners: Compliance with Registration Conditions (PD2008_071)
• Occupational Assessment, Screening and Vaccination Against Specified Infectious Diseases (PD2011_005)
• Overseas Funded International Medical Graduates (PD2009_011)
• Recruitment of Overseas Health Professionals: Panel of Overseas Recruitment Agencies (PORA) (PD2013_041)
• Service Check Register for NSW Health (PD 2013_036)

1.3.3 Relationship to Chief Executive Service Agreements

Chief Executives are required to achieve a minimum of 2.6% Aboriginal workforce target as part of the state’s agreement with the Commonwealth, and NSW Health’s commitment to Closing the Gap in health outcomes for Aboriginal people in NSW. Priority Aboriginal health issues demand a focus on the recruitment and retention of skilled Aboriginal people across health services to achieve the minimum target of 2.6% of Aboriginal staff and halve the gap in employment outcomes between Aboriginal and non-Aboriginal people. This strategy is underpinned by the Respecting the Difference: An Aboriginal Cultural Training Framework for NSW Health (PD2011_069).

1.4 Definitions

NSW Health organisation: For the purposes of this policy directive, any public health organisation as defined under the Health Services Act 1997, the Ambulance Service of NSW, 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 Health Services Act 1997.
2 RECRUITMENT AND SELECTION STANDARDS

2.1 Vacancy identified

All managers should be actively aware of the staffing situation and vacancies in the wards/units under their responsibility. Appendix 1.2 must be followed in relation to the identification and management of vacancies. Vacancies that occur on a casual or temporary basis eg due to staff leave, must be reviewed to determine workload and service provision implications and action taken to fill these vacancies where identified as necessary.

Where a pending vacancy is identified the appropriate action, by an appropriately delegated officer, should commence immediately taking into consideration the requirements of any relevant recruitment restrictions. To wait until a position is vacated unnecessarily delays the process, and, particularly in frontline positions, can negatively impact on other staff and have service delivery implications. Appendix 1.3 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 documentation

All positions in the NSW Health Service must have an accurate, up-to-date position description/role description that addresses, as a minimum, the following:

- Position title (to be used in the position description/role description when referring to the job), remuneration and employment status
- Classification and grade
- Selection criteria (see Section 2.2.1).
- Duties, responsibilities and accountabilities of the position, including work health and safety responsibilities specific to the role being undertaken
- Skills, knowledge and experience needed in the position (often referred to as capabilities).
- Information about the facility, division and work area
- Information on the NSW Health CORE values
- Organisation chart showing the position’s relationship to other positions/role titles and their classification and grade
- Any mandatory physical, psychological or sensory requirements necessary to perform the inherent requirements of the job, and how they will be assessed. (See the current NSW government policy on employment health assessment for information on determining inherent job requirements).
- Trade or professional qualifications that are a legal or award requirement for the position (see Section 2.2.2); or any educational requirements of the position, for example, acceptance into a recognised training program
- Length of previous work experience or training program required for the position (only if required by law or an industrial instrument)
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• Professional registration, licensing or authority to practice requirements
• Vaccination category of the position, and mandatory vaccination requirements
• Whether the position is an identified or targeted position, and notice of any relevant exception / exemption under the NSW Anti-Discrimination Act 1977
• If required by the position, reference to an understanding of a particular community or cultural sensitivity
• Information about the classification of the position in relation to mandatory criminal and working with children checks (refer to the current NSW Health policy on employment checks).

Consultation with Aboriginal Employment Coordinators, Managers of Aboriginal Workforce Development or similarly responsible position holders is recommended to determine whether the position is suitable for an identified or targeted Aboriginal recruitment process. This may include an Aboriginal Traineeship pathway (see Appendix 1.6).

2.2.1 Review selection criteria

Selection criteria are used to assess the suitability of all applicants for the position and must:

• Be clear and concise, and directly relate to the position
• Not be less favourable to a particular EEO group than to others
• Be limited to a maximum of eight
• Describe the essential requirements for the position only (not desirable requirements)
• Outline the minimum skills, knowledge and experience required to perform the inherent requirements of the job
• Exclude skills that can be learned in a reasonable time on the job
• Only include qualifications where they are a legal or industrial requirement for the position
• 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 industrial requirement in relation to the position
• Specify any relevant mandatory professional registration, licence requirements, membership of state or national associations and/or authority to practice requirements, or working with children check or criminal record check requirement for the position.
• Specify any requirement for membership a particular EEO group for identified or targeted positions, or any requirement for an understanding of such a group.
• Exclude any preference or availability to work in particular locations (see Section 2.15 regarding preference matching).

NSW government sector common selection criteria are no longer required to be included in selection criteria.
2.2.2 Requiring professional qualifications

Where a professional qualification would enhance the capacity of the applicant to undertake the duties of the position, but is not required by law or an industrial award, include the following: A degree in a relevant field, or equivalent work experience, or a combination of study and work experience.

If a manager wishes to include, as mandatory, a qualification in the selection criteria that is not required by law or industrial instrument, this must be approved by the Chief Executive.

2.3 Action prior to advertising

Prior to advertising vacancies, the following actions must take place, as applicable:

2.3.1 Redeployment

Any decision to redeploy an injured or displaced/excess staff member to a vacancy must be based on a fair and unbiased assessment of the candidate’s individual circumstances and suitability for the position. Therefore, it is recommended that an assessment committee be established to interview the candidate(s). Any decision in relation to the redeployment of a staff member must be appropriately documented.

Injured staff

Where a work related illness or injury prevents a member of staff from returning to the duties of his/her existing position, workers compensation legislation requires that, as far as practicable, every effort is made to place the staff member into a position that is the same as or equivalent to their existing position.

Therefore, the possibility of placing such staff to any vacant positions, either temporarily or permanently, should be explored prior to advertising the positions. NSW Health organisations must have a process in place to identify injured staff members suitable for redeployment.

A vacancy can be filled through redeployment of an injured staff member where:

- The staff member meets the selection criteria for the vacant position, or can demonstrate a capacity to meet the criteria within an agreed period, and, if necessary, supported by training, and

- The duties of the vacant position are consistent with medical opinion regarding suitable duties for the staff member, and with the requirements of the staff member’s injury management plan.

For further information, see the current NSW Health policy on injury management and return-to-work.

Excess staff

In accordance with NSW Government and NSW Health policy, NSW Health organisations must consider excess staff members for vacancies prior to advertising the vacancies. The current NSW Health policy on managing excess staff outlines the processes for this.
2.3.2 Eligibility lists

An eligibility list may apply to the position for which it was created, as well as other vacant positions (including at other sites) that are substantially the same and have substantially the same selection criteria. This may include a particular classification of position experiencing recurring vacancies, if so determined by the Chief Executive or delegate.

Some industrial instruments contain provisions regarding the creation and use of eligibility lists. NSW Health organisations do not have to use an eligibility list where it seems fairer or more appropriate to conduct a new selection process or take other action. Furthermore, prior to filling a position from an eligibility list, it must be confirmed that the selection criteria and inherent job requirements for the current position are not substantially different from those used at the time the eligibility list was created.

Offers of employment to individuals on an eligibility list must be made in the order in which the names appear on the list ie first offer to first name on the list.

Where a position is offered to someone on an eligibility list it must be ensured, prior to any offer of employment, that:

- All the mandatory employment screening and verifications have occurred, including referee checking and any necessary pre-employment health assessment.
- Current confirmation is sought to determine that no significant conduct or performance issues exist.
- Any mandatory license/registration/membership is still current.
- The inherent job demands of the position can still be met.
- Any citizenship/working visa requirements are still current.

Refer also to Section 2.14.2 which deals with the creation of eligibility lists.

2.4 Filling a vacancy without advertising

Subject to requirements of any other Modules, positions can be filled temporarily for over 13 weeks without advertising:

- In accordance with any relevant provisions of an applicable industrial award or
- As a secondment from another Government Sector Agency (including another NSW Health organisation) with application of the conditions set out in Part 6 (Section 31) of the Government Sector Employment Rules 2014 or
- As an intra NSW Health organisation secondment consistent with the relevant conditions set out in Part 6 (Section 31) of the Government Sector Employment Rules 2014 or
- With the approval of the Chief Executive or delegate, in the following circumstances:
  - 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 all instances the suitability of any candidate to perform the required duties is to be assessed, and all required mandatory employment checking actions, including referee checks and verification of registration, undertaken.

Positions can be filled permanently without advertising / re-advertising:

- As a transfer from another Government Sector Agency (including another NSW Health organisation) with application of the conditions set out in Part 6 (section 29) of the Government Sector Employment Rules 2014 or
- As an intra NSW Health organisation transfer consistent with the relevant conditions set out in Part 6 (Section 29) of the Government Sector Employment Rules 2014 or
- Where a casual staff member employed under the Public Health System Nurses’ and Midwives (State) Award converts to permanent employment in accordance with the conditions set out in Clause 29 (Part-time, Casual and Temporary Employees) of the Award** or
- Where a permanent part-time staff member employed under the Public Health System Nurses’ and Midwives (State) Award seeks to and has agreement to increase their contracted hours or convert to full-time status as per Clause 29 (Part-time, Casual and Temporary Employees) of the Award (any such request must be reviewed expeditiously) or
- With the approval of the Chief Executive or delegate, in the following circumstances:
  - The position was advertised as a permanent position in the preceding six months and no suitable applicants identified and
  - The position requirements (including 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 occupational grouping and
  - The position requires urgent filling to meet service delivery needs and
  - All relevant legislative and award provisions are met.

In all instances the suitability of any candidate to perform the required duties is to be assessed, and all required mandatory employment checking actions, including referee checks and verification of registration, undertaken.

**In accordance with the provisions in the Public Health System Nurses and Midwives (State) Award, where a casual employee seeks to convert their employment from casual to permanent employment, the phrase ‘regular and systematic basis for a sequence of periods of employment’ means work that has occurred within a NSW Health organisation.

For staff specialist positions refer to the standards outlined in Module Two.

For the Junior Medical Officer Annual Recruitment Campaign, refer to the standards outlined in Module Four.

2.4.1 Walk-in applicants

A walk-in applicant refers to a job applicant who contacts a NSW Health organisation for employment outside a current recruitment process.
Where walk-in applicants possess skills and qualifications that are in urgent demand in that NSW Health organisation, and where the other conditions outlined above in 2.4 are also met, walk-in applicants may be considered for appointment without advertising the position. A walk-in applicant must still provide all relevant required declarations, documentation and forms to allow for a proper assessment of their suitability for the position in line with this policy.

NSW Health organisations may also consider running ongoing advertisements to facilitate walk-in applicants for positions in high demand. Refer to Section 2.5 for further information about such advertisement.

Walk-in applicants for nursing positions must be provided with the outcome within five working days.

2.5 Advertising requirements

When advertising positions:

• Any current instructions from the Secretary, Ministry of Health regarding advertising must be met.
• Any Award specific requirements must be met.
• Any specific legislative requirements must be met eg security industry legislative requirements to list master licence number etc.
• Vacancies must be advertised in a cost effective manner, while advertisements must still contain enough information to attract and inform the field of potential applicants.
• The advertising scope and media must be relevant to and appropriate for the position being advertised.
• Vacancies advertised across NSW Health or beyond are to be placed onto eRecruit, along with a link to the position information package.
• Consideration is to be given to whether the field of potential applicants can be reached by online advertising, or whether a brief reference to vacant positions should also appear in the appropriate print media referring potential applicants to additional information.
• Contact details for further information and a closing date are to be included.

Rolling or ongoing advertisements may be considered for positions in high demand (eg nursing, medical staff). They allow for the speedy consideration of applications (eg walk-in applicants) in situations where positions need to be urgently filled, while not compromising the principles of merit and equity. Such advertisements need not have a closing date, but their ongoing need, including the ongoing relevance of the selection criteria, must be reviewed regularly.

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.

As a general rule, if the position 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, it is to be
advertised across NSW Health as a minimum, unless this is in conflict with any related directions from the Secretary, Ministry of Health.

For the Junior Medical Officer Annual Recruitment Campaign refer to standards outlined in Module Four.

2.6 Position information package

As well as the information listed in Section 2.2 of this Module, potential applicants must also be advised of the following:

- Applicable award and classification, salary range, terms and conditions of employment
- The geographical location of the position, and any rotation requirements
- The need to nominate two referees, one of whom must be a current supervisor/manager
- The need to address the selection criteria, and include an up-to-date curriculum vitae of employment history covering the last 10 years* (*for health care and other professional positions)
- That a NSW Health internal service check, using the NSW Health Service Check Register, will be conducted on all preferred applicants
- The requirements regarding a National Criminal Record Check and a Working with Children Check
- The application form to be used or the link to the eRecruit system
- The supporting information that will be required to be uploaded into the eRecruit system as part of the application (eg copy of qualifications, visa). Note: originals will also be required where the applicant is selected for interview.
- The requirement for citing Aboriginality, where relevant
- An address for forwarding applications and closing date for applications, where not submitting an application via the eRecruit system
- Contact details for further information.

The information must also include a copy of, or a link to:

- The eRecruit document ‘Information for applicants’
- The NSW Health Code of Conduct
- The Occupational Assessment, Screening and Vaccinations Against Specified Infectious Diseases Policy Directive
- Standard Employment Checking Consent Form for relevant employment
- Health Declaration Form
- The NSW Health National Criminal Record Check Consent Form and 100 Point Identification Checklist
- The NSW Health Criminal History Declaration
Recruitment and Selection of Staff to the NSW Health Service

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• Information on how to obtain a Working with Children Check from the NSW Office of the Children’s Guardian
• Information for overseas applicants, in relation to additional criminal record check requirements and how to apply for Working with Children Checks.

For staff specialist positions refer also to the standards outlined in Module Two.

2.7 Approval to engage recruitment consultants

It is a matter for NSW Health Chief Executives to determine local processes to ensure that use of executive search/recruitment consultants is carefully considered, and that relevant NSW Health policies are followed regardless of the method of recruitment.

Every effort must be made to fill positions through the usual avenues, prior to utilising a recruitment company.

Where prior state wide arrangements (eg Panel of Overseas Recruitment Agencies) have been approved and formally communicated to NSW Health organisations, these must be used. If there is any doubt as to whether any pre-approved statewide arrangements exist, advice must be sought from Workforce Planning and Development Branch, NSW Ministry of Health, prior to engaging the services of a recruitment consultant.

2.8 Application management

All applicants must:
• Have their application dated on receipt (this can be electronic dating).
• Receive an acknowledgement of receipt of their application (this can be an automated email).
• Be advised if the selection process has been delayed or is not to go ahead.

A grace period of 24 hours for submitting an application and a late link must be provided where there are unforeseen or unavoidable delays e.g. server down etc.

Where the convenor is considering whether to accept late applications, beyond the 24 hours grace period, the criteria listed in Appendix 1.4 should be applied. Late applications should not be accepted after interviews have started, except in the most exceptional cases.

Any decision around accepting late applications is at the discretion of the convenor and must be fairly applied to all late applications. Reasons in support of any such decision must be clearly documented in the selection papers.

For staff specialist positions refer also to the standards outlined in Module Two.

For the Junior Medical Officer Annual Recruitment Campaign refer also to the standards outlined in Module Four.

2.9 Selection process

The usual selection process for NSW Health organisations will include establishing a selection panel. The role of the selection panel is to:
- Consider applications to determine which applicants should progress through the selection process
- Further assess applicants’ suitability via an interview process and/or any other comparative assessment processes
- Conduct (or ensure conduct of) all necessary verifications
- Make a recommendation to the duly delegated decision maker or other body where appropriate.

For staff specialist positions refer to the standards outlined in Module Two.
For the Junior Medical Officer Annual Recruitment Campaign refer also to the standards outlined in Module Four.

2.9.1 Selection panel composition

The composition 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 minimum requirements must be met:

- The size and membership of the panel should ensure that the selection process can be properly performed and that different perspectives are brought to the selection process. As the minimum, the panel must have two members, one of whom is the designated convenor.
- There is at least one male and one female panel member, wherever possible.
- The convenor must have completed recruitment and selection training or refresher training in the last 3 years to ensure an understanding of NSW Health policy, and completed the Respecting the Difference training.
- One member must be ‘independent’ (refer to Section 2.9.3 Role of the independent).
- Panel members should, as far as practicable, hold positions that are more senior than the position being filled.
- Identified and targeted positions must be appropriately represented (e.g., the panel 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.
- All panel members are required to declare any real or potential conflict of interest as soon as they become aware of it e.g., close personal relationship or previous workplace conflict with an applicant. Any conflict of interest must be managed/discharged as necessary and documented. Options may include:
  - Adding an additional panel member as a safeguard e.g., two independents
  - Limiting the contribution of the panel member e.g., contribute to discussion only as a subject expert, but not take part in decision-making
  - Replacing the panel member.
• At least one member of the panel should have enough knowledge of the position requirements to be able to effectively assess applications.
• The position description/role description, advertisement, selection criteria and all applications and assessment information must be available to all panel members.
• Any position-specific NSW Health, legal or industrial requirements must be met eg a Ministry representative on selection panels for Heads of Internal Audit.
• Where, as a predetermined structured program, the successful applicant could be placed in, or will rotate between, a number of facilities/organisations, these facilities/organisations should be represented on the panel. (Note that facilities can be delegated to represent other facilities.)

It is recommended that Chief Executives or delegate consider including appropriate additional expertise on the selection panel 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 recommenced as a result of complaints about the original process.

It should be noted that there is no impediment to a selection panel member acting as referee for an applicant, and often this is unavoidable eg when they are an applicant’s current supervisor. However, selection panel members should declare this workplace relationship as soon as they become aware that they are a nominated referee for one of the applicants. In these instances it is advisable to seek an additional relevant reference check, where possible.

Where an original panel member arranges for someone else to participate on the panel, 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.

For staff specialist positions refer also to the standards outlined in Module Two.
For the Junior Medical Officer Annual Recruitment Campaign refer also to the standards outlined in Module Four.

2.9.2 Role of the convenor
The convenor is responsible for ensuring that:
• All relevant NSW Health standards are met during the selection process, as specified in this and any other relevant Module, including establishing an appropriate selection panel, ensuring the relevant checking and vetting occurs (refer to Appendix 1.5 Convenor’s Checklist), and resolving any conflicts of interest appropriately.
• All relevant material is considered in making a recommendation.

For staff specialist positions refer to the standards outlined in Module Two.
2.9.3 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 or NSW Health organisation or external to NSW Health, and be unlikely to be unduly influenced by other panel members.

2.9.4 Conducting the cull

When culling applications, the following requirements must be met:

- All panel members have access to all applicants’ entire application and any supporting documentation and the selection criteria and position description/role description.
- Information must be assessed in a fair and consistent manner, with a common understanding of the standard required of applicants.
- Applications are culled based on selection criteria only (for multiple applications, further comparative culling can occur against selection criteria).
- The reasons for culling an application are documented.
- All panel members must agree on the applicants to be culled (where agreement can’t be reached a minority report must be made to the decision maker prior to the recruitment process continuing).

Where applicants include affected or excess staff with priority status, such staff are entitled to priority assessment before any other applicants. Refer to the current NSW Health policy on managing excess staff.

For the Junior Medical Officer Annual Recruitment Campaign refer also to the standards outlined in Module Four.

2.9.5 Further assessment of applicants

Once the cull has been completed, assessment methods to determine who of the remaining applicants is the most suitable for the position will vary depending on the nature and level of the position.

Usually the assessment process would include an interview involving direct contact with the applicant, either face to face or via another interactive visual medium. Face to face or videoconference / skyped interviewing should be used as they allow for visual identification of the applicant who is providing responses to the selection panel’s questions. Telephone interviews should only be utilised in the limited circumstances where there are no other options available to the panel.

Where interviews occur via any interactive visual medium or the telephone, all sighting of mandatory original documentation must occur prior to the preferred applicant commencing work.

Other assessment methods may include:

- Work samples or tests e.g. word processing, literacy and numeracy tests
- Presentation by the applicant(s)
• Group exercises or role plays
• Assessment by specialist groups
• Personality questionnaires

Any assessment method must:
• Be specifically targeted to the selection criteria and the position description/role description
• Not unfairly disadvantage applicants who have a disability or are from a particular cultural or community group
• Be applied in a flexible manner, as far as practicable, without affecting the validity of the assessment method.

Applicants to be assessed must be:
• Provided with information about the assessment method/s and approximately how long they will take
• Be given at least three days’ notice, unless it is mutually convenient to schedule the assessment/s sooner
• Advised of the names and titles of the selection panel
• Advised what documentation they are required to bring to interview.

For staff specialist positions refer also to the standards outlined in Module Two.

2.9.6 The interview process

While it would be the usual practice that all selection panel members take part in the interview process, this may not always be practicable. At a minimum, there must always be two people conducting any interview, unless otherwise specified in any additional Module (for staff specialist and clinical academic positions refer also to the standards outlined in Module Two, and for Junior Medical Officer Annual Recruitment Campaigns refer also to Module Four).

Interview questions must be clear, unambiguous and directly related to the selection criteria and position description/role description. A common set of initial questions should be asked of all applicants. Follow-up questions exploring issues raised by the applicant or eliciting further information can be asked.

The task of the selection panel is not to determine which applicant does best at interview, but rather use the interview process and any other assessment processes as guides to identify who is the most meritorious applicant.

2.9.6.1 Sight/collect or record details of mandatory documentation

Original documentation must be sighted and details recorded at the time of interview (see Appendix 1.5 Convenors checklist) 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 the current NSW Health policy on employment checks)
• Citizenship/residency or working visa status (the details must be recorded on the 100 point ID Check Form). It is noted that in some limited circumstances, where an applicant is from overseas, they may not be able to seek a visa without a conditional job offer.

• Evidence of current professional registration/licence status, or eligibility for membership of the relevant state or national professional association where applicable (current professional registration/licence status must also be confirmed directly with the registering/licensing authority).

• Proof of any educational, trade or professional qualifications or any educational requirements for the position (eg acceptance into a recognised training program) listed as selection criteria (note: it is not necessary to sight qualifications used to gain registration, as this role is undertaken by the registering authority).

• 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 length of experience, where listed as a selection criterion.

• Evidence of the required immunisation status eg New Recruit Undertaking/Declaration and TB Assessment, Vaccination Record Card or Certificate of Compliance.

• For identified or targeted positions, evidence of relevant characteristics eg citing of Aboriginality (see Appendix 1.6).

Original documents only may be copied, and copies certified by the person sighting the originals on behalf of the NSW Health organisation. Where there are multiple interviews, it may be more practical to sight originals to confirm eligibility of the applicant for the position, but defer copying and certifying until preferred applicants are determined. However, except in limited circumstances such as overseas based applicants, and subject to emergency appointment provisions in the current NSW Health policy on employment checks, the above activities must take place prior to any recommendation to appoint an applicant to a position.

Where originals of tertiary qualifications (professional, academic or vocational) are unavailable, academic transcripts, certified by the educational institution and including a statement that all requirements of the relevant course have been met, may be acceptable.

For overseas qualifications that are in a language other than English, where the original qualification is not available, the applicant must be asked to provide a transcript translated into English by an officially accepted state or commonwealth body, and certified as such (see www.crc.nsw.gov.au or www.immi.gov.au).

For other documentation only, e.g. memberships etc, where the original is not readily available, certified copies may be considered.

Where an applicant’s work history contains blank periods, these should be explored further with the applicant. Supporting documentation may be required in some instances and any issues should be followed up in referee checks.

The following documentation from applicants must also be collected at interview (if not already provided via the declarations in the eRecruit system):
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• Signed NSW Health National Criminal Record Check consent form (and details checked against the 100 points of identification)
• Signed Health Declaration Form (note that 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.

See also Section 2.11 of this Module which relates to verifying information.

2.9.6.2 Confirm referee details

Details of two referees, one of whom is a current supervisor/manager, must also be confirmed at interview.

There will be circumstances where provision of a current supervisor/manager may not be possible, such as where the applicant is:
• A first time entry to the workforce
• Currently unemployed
• Returning to the workforce after a break.

In such circumstances, the selection panel will need to be flexible in determining the appropriateness of the nominated referees.

Where an applicant refuses to nominate a current supervisor/manager, even though there is one, or contact is not able to be made with the current supervisor, the applicant must not be automatically excluded from the application process. However, the panel needs to be satisfied that, in the absence of a reference check with the current supervisor/manager, 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.

Therefore the applicant must be:
• Advised that the purpose of a referee check with a current supervisor/manager is to help verify current information relevant to their claim to the position, and any relevant conduct or performance issues
• Advised that because of this, a referee check with the current supervisor/manager is NSW Health policy
• Given the opportunity to discuss reasons with the panel for the refusal.

Depending on the circumstances, the selection panel may decide to give the applicant the opportunity to provide alternative referee(s) eg a past supervisor/manager. However, the applicant must be advised that if referees are unable to provide up to date advice about key claims to the position and about recent past conduct and performance, the application may not be assessed further.
2.9.6.3 NSW Health internal service check

An internal service check via the NSW Health Service Check Register (SCR) will be conducted prior to any offer of employment. The purpose of the check is to identify whether the preferred applicant is subject to current enquiries into alleged misconduct, or has been found to have engaged in misconduct resulting in a decision that administrative, disciplinary or remedial action was necessary to mitigate identified risks.

A SRC record does not necessarily preclude a person from being employed. If the SRC record indicates that there may be risks relevant to the role for which the applicant has applied, the applicant must be contacted and a risk assessment completed. While interviewees may choose to volunteer such history themselves at interview, which will allow the panel to discuss these issues with the applicant further, the risk assessment relating to a SCR record does not form part of the selection panel process and is managed separately by staff with ongoing responsibilities and experience in undertaking risk assessments as part of the recruitment process (such as for criminal records) and in accordance with established principles and processes for managing other recruitment risk assessments.

The SCR is not checked until after a person has been identified as a preferred applicant and all other checks and enquiries, apart from criminal record checks, has been completed. See NSW Health policy on the NSW Health Service Check Register for further information.

2.10 Determine preferred applicants

When the assessment process has been completed, the panel must analyse all resulting information and identify preferred applicant(s) for the position, including an eligibility list if applicable. It is usually at this point that any outstanding verification activities are completed and referee checks are conducted. Once these have been successfully completed, the relevant criminal record checking should take place.

For staff specialist positions refer to the standards outlined in Module Two, including the additional requirement to determine the scope of clinical practice.

2.11 Verify information

Appendix 1.5 provides a checklist of all the mandatory actions required to be undertaken, including referee checks and verifying registration/licence, prior to the selection panel making a recommendation to a decision maker to appoint the preferred applicant to the position.

Evidence that all relevant checks took place, and any findings of significance, must form part of the selection documentation.

For staff specialist positions refer to the standards outlined in Module Two.

For the Junior Medical Officer Annual Recruitment Campaign refer also to the standards outlined in Module Four.

2.12 Conduct referee checks

At least two referee checks must be conducted on the preferred applicant(s) prior to any offer of a position, 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 to the position and
• The position is unskilled and
• The position has a low risk potential and
• All other verifications have taken place.

The purpose of referee checks is to confirm the claims made by the applicant, explore any particular issues arising from the interview or assessment process and provide information about the previous employment history of an applicant. For this reason referee reports should not be sought prior to interviewing an applicant.

Additional referee checks may be necessary where the selection panel is not fully satisfied with the results of the two minimum checks, or they wish to explore additional issues. In these circumstances applicants must be asked to provide details of additional referees.

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.

In instances where agencies from the Panel of Overseas Recruitment Agencies (PORA) are being used, NSW Health organisations are required to review the referee reports prepared by the PORA agency, and 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.

All referee checks must be conducted in a structured manner, based on a set of questions prepared by the selection panel seeking specific information about:

• The current knowledge, skills, competence and experience of the applicant as they related to the selection criteria/position
• Any other significant claims made by the applicant in relation to the position
• Recent past performance, professional conduct and attendance record of the applicant
• Issues or concerns related to the skills, competence and experience identified during the application or interview process.

See Appendix 1.7 for mandatory minimum requirements when conducting referee checks.

All referees must be advised that information obtained from them, when incorporated into the selection committee report, may form part of the feedback provided to unsuccessful applicants.

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

Where the panel is unable to confirm the relevant information via referee checks, the application should not be considered further.
National criminal record checks must only occur after all other checks and enquiries regarding the suitability of the preferred applicant have been completed, including the Service Check Register check. National criminal record checks are managed separately from the selection panel.

For the Junior Medical Officer Annual Recruitment Campaign refer also to the standards outlined in Module Four.

2.12.1 Referee checks

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

2.12.2 Written referee checks

Written (including electronic) references are only to be accepted under the following circumstances:

- Where, due to time differences and/or work commitments, detailed phone referee checks are proving difficult to arrange with the referee/s, or where the person conducting the referee check is having difficulty understanding responses to the questions because English is not the first language of the referee and
- Direct, verbal contact has been made with the referee, their identity has been confirmed, and their relationship to the applicant has been confirmed.

Questions may then be emailed to the referee, with the advice that they need to be completed with appropriate detail, and returned to the person responsible for the referee checks within an agreed time. Responses must be considered prior to any offer of employment, and must be retained in full with the selection papers.

2.13 Assessing information

The outcomes of a check against the Service Check Register, any required criminal record checks, a check of registration status with registering authorities and, where necessary, a check with the Health Care Complaints Commission, as well as referee and any other past performance checks must be assessed and any appropriate risk management action, as required by the relevant policies, taken prior to a formal job offer. At a minimum, contact with the HCCC should be made if the selection panel forms a concern that a complaint about an applicant has recently been made.

The identification of a Service Check Register record must be managed by persons with experience in undertaking recruitment risk assessments and in accordance with the requirements of current NSW Health Service Check Register policy.

The current NSW Health employment checks policy must also be consulted regarding the requirements around National Criminal Record Checks and Working With Children Checks for existing staff upon transfer, secondment or promotion.

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 Services Branch so that the nature of the restrictions can be adequately understood and assessed. Contact details for the Pharmaceutical Services Branch can be found at [http://www.health.nsw.gov.au/pharmaceutical/Pages/wda.aspx](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. Any conditions must be documented and compliance monitored. In relation to medical practitioners, see also the current NSW Health policy on [medical practitioners’ compliance with registration conditions](http://www.health.nsw.gov.au/). When checking for any history of complaints against an applicant or any professional performance issues with the Health Care Complaints Commission (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.

Where required by the position, and if not already conducted, the relevant health assessment of the preferred applicant must also be conducted prior to a formal offer. Priority for health assessments should be given to frontline positions. If the health assessment finds that a preferred applicant does not meet the inherent job requirements of the position because of disability/impairment, consideration must be given to whether a reasonable adjustment can be made to the position to allow the applicant to carry out its inherent requirements.

The preferred applicant’s immunisation status needs to be assessed by an appropriately trained staff member (refer to the current NSW Health policy on [occupational assessment, screening and vaccination against specified infectious diseases](http://www.health.nsw.gov.au/)).

It is contrary to NSW anti-discrimination legislation 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.

### 2.14 Make recommendations

Once all necessary verification activities and referee checks have been completed and the claims for the position of the preferred applicant(s) confirmed, a recommendation should then be made to the Chief Executive or relevant decision-maker on the preferred applicant(s) for employment, and on any eligibility list created.
The recommendation must be provided to the decision maker, along with the full application, referee reports and documentary evidence that all necessary checks have taken place. The recommendation 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.

This documentation should be in a form that allows for review by a third party, if necessary, in the event of a dispute.

For staff specialist positions refer to the standards outlined in Module Two.

2.14.1 Recommended applicant

The recommended applicant is the applicant who is considered the most suitable person for the job, based on a comparative assessment of applicants' abilities, knowledge, skills, experience and qualifications (where required) against the selection criteria; past professional conduct and performance, as supported by referee checks and outcomes of the internal Service Check Register check and relevant employment checks (eg National Criminal Record Check and, where required, Working With Children Check).

2.14.2 Eligibility list

The creation of eligibility lists is part of the selection process for positions in NSW Health, particularly frontline and other positions which have proved difficult to fill, and positions where there is a high turnover or where there is a high demand for a particular occupational group. Any eligibility list is to be submitted for approval as part of the recommendation.

An eligibility list may include one or more applicants who were deemed suitable for the position, but were not the recommended applicant. Where an eligibility list is created, these other suitable applicants must be ranked in order of merit. Eligibility lists are current for up to 12 months, unless otherwise provided by the relevant award. Also see Section 2.3.2.

2.14.3 Australian citizenship / residency considerations

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.

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.

All other people entering from New Zealand or any other country require passports and appropriate visas and entry permits.

A person who is not an Australian citizen or a permanent resident is only eligible for temporary employment for a period not longer than the duration of their current visa. The letter of offer of employment to such an applicant must specify that it is on a temporary basis and not guaranteed...
beyond the specified end date, notwithstanding that the successful applicant’s visa may be for a longer time period.

Employer sponsored visa programs, such as subclass 457 visas, aim to fill shortages that cannot be filled from the local labour market. The employment of a subclass 457 visa holder can only occur if there is no local suitable applicant. Information on obligations to undertake labour market testing, and exemptions, can be found on the [website of the Department of Immigration and Border Protection](https://移民和边境保护部门的网站).

During an official NSW Health recruitment campaign for clinical staff, a conditional offer of employment to a suitable overseas applicant may be made prior to their securing permanent residency where:

- An offer of employment is required for them to apply for permanent 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.

Residency status must be checked and confirmed prior to the person commencing permanent employment within NSW Health. Where permanent residency has not been granted the offer of employment must be withdrawn, in line with the provisions contained in the conditional offer.

### 2.14.4 Alternative and minority reports

If a selection panel is unable to reach a unanimous decision, the panel member(s) in disagreement should prepare an alternative report (two member panels) or a minority report (more than two member panels) detailing areas of disagreement and provide an alternative recommendation, where appropriate. The alternative or minority report is to be submitted to the decision maker along with the panel’s final report.

### 2.15 Preference matching in annual recruitment campaigns (bulk recruitment)

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 after the merit selection process has been completed. Preferences are not to be used for culling or selecting applicants, as they do not relate to the applicants’ ability to do the job, but to their preferred job location.

*For the Junior Medical Officer Annual Recruitment Campaign refer also to the standards outlined in Module Four.*

### 2.16 Approval to appoint

All recommendations to appoint the preferred applicant(s) 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.

The convenor of the selection panel may also be the delegated decision maker. In some instances, 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.

Prior to approving the recommendation, the decision maker must be satisfied that all necessary selection checks have taken place, and that the recommended applicant is an appropriate person to be offered the position. It is not sufficient for the decision maker to approve the employment of an applicant simply because it has been recommended.

When employing staff specialists the Critical Actions Compliance Checklist must be completed. Refer to Appendix 2.1 in Module Two.

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.

**For staff specialist positions refer also to the standards outlined in Module Two.**

**For the Junior Medical Officer Annual Recruitment Campaign refer to the standards outlined in Module Four.**

### 2.17 Make the formal job offer

Once all mandatory standards in this and any other relevant Module have been met and the recommended appointment of the preferred applicant(s) has been approved by an appropriately delegated officer, a formal offer of employment may be made to the successful applicant(s).

**For staff specialist positions refer to the standards outlined in Module Two. For the Junior Medical Officer Annual Recruitment Campaign refer to standards outlined in Module Four.**

If the emergency appointment provisions in the employment checks policy need to be activated due to an incomplete National Criminal Record Check or Working With Children Check, a provisional offer may be made in the first instance, subject to satisfactory employment checks policy requirements.

#### 2.17.1 Employment documentation

The successful applicant should have been given sufficient information about the terms and conditions of their employment as part of the selection process. If this has not yet occurred, the information must be provided, in writing, with the offer of employment, and the applicant 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.

In addition, the information identified in Appendix 1.8 must, as a minimum, be included in the offer of employment. Where a standard letter of employment template exists (available in the eRecruit system), this must be used. The successful applicant must be asked to accept the offer and the related conditions in writing prior to commencing duty. The successful applicant must not make any alterations to the letter of offer. Any purported amendments or variations to a signed letter of offer will not be accepted and are of no effect.

Care must be taken in preparing letters of employment to ensure that any arrangements which do not form part of the ongoing terms and conditions of employment are either not referred to...
in the letter, or are mentioned in a way which makes it clear that they are not regarded as on-going entitlements eg material about the provision of motor vehicles or managerial allowances. Particular care should be taken to avoid giving commitments about the on-going provision of a private use motor vehicle.

Where employment is contingent on visa requirements this should be reflected in the letter of employment.

*For staff specialist positions refer also to the standards outlined in Module Two.*

*For the Junior Medical Officer Annual Recruitment Campaign refer also to standards outlined in Module Four.*

### 2.17.2 Where an offer is declined

Where the successful candidate declines the offer, employment screening must be initiated for the next ranked applicant on the eligibility list, and any outstanding remaining actions from Section 2.11 of this Module onwards will need to be conducted.

*For staff specialist positions refer to the standards outlined in Module Two.*

*For the Junior Medical Officer Annual Recruitment Campaign refer also to the standards outlined in Module Four.*

### 2.18 Meeting visa requirements

Where the recommended applicant is not already an Australian citizen or permanent resident, they will need an appropriate working visa to work in Australia. In some cases, sponsorship by an Australian organisation is a requirement for such a visa. NSW Health organisations should check for any specific requirements with the Department of Immigration and Border Protection. Also see Section 2.14.3 of this Module.

*For further information, see Department of Immigration and Border Protection at [www.immi.gov.au](http://www.immi.gov.au)*

### 2.19 Advise unsuccessful applicants

Applicants must be advised in writing that their application was not successful. Contact details (usually the convenor’s) must be provided in case they wish to seek feedback on why their application was unsuccessful. Unsuccessful applicants are also entitled to be informed of the identity of the successful applicant once the offer of employment has been accepted.

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).

### 2.20 Post-selection feedback

Unsuccessful applicants are encouraged 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 papers. NSW Health organisations may consider providing brief
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 used to make a decision about the applicant, from all stages of the selection process eg written application, interview performance, any assessments, referee feedback etc
- Be provided in a constructive and useful way.

Constructive and useful feedback supports good relations with potentially successful future candidates, and can minimise the likelihood of complaints or GIPA requests for selection documentation.

2.21 Documentation and retention of records

All recruitment and selection related records must be retained (either in paper form or electronically) in line with the requirements of Appendix 1.9. Particular note must be given to the requirement in Appendix 1.9 that copies of certain documentation flowing from the recruitment and selection process must also be placed on the successful applicant’s personnel file.

In accordance with the Privacy and Personal Information Protection Act 1998, all selection documentation related to personal information about the job applicants must be treated confidentially both by the selection committee and other staff involved in managing the recruitment and selection process. All related documentation must be stored securely.

2.22 Complaints management: internal review

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

All complaints about the selection process should:

- Be lodged in writing within 14 days of the date they were advised of the successful applicant (this requirement does not apply to bulk recruitment, where different timeframes often apply to the entire recruitment process)
- Clearly articulate specific concerns in relation to the process utilised and where the complainant believes it has departed from the standards outlined in the relevant NSW Health policy
- Be initially assessed by someone independent to the selection process in question.

Where an initial assessment indicates there is credible evidence to suggest that the standards outlined in NSW Health policy may not have been followed, a more detailed review may be conducted.

A selection panel’s recommendations should only be overturned, and a new process commenced, if any procedural flaws are such as to call into question the substantive validity of the recommendation.
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 prior to the new offer of employment.

2.23 Commencing work

Once appointed, the appointee should commence work as soon as practicable within an agreed timeframe. In certain emergency situations, provisional commencement of employment may occur prior to finalisation of the criminal record checking process, provided the relevant provisions in the current NSW Health employment checks policy have been met.

Where a conditional offer was made prior to the applicant securing permanent residency (eg overseas recruitment campaigns for nurses), residency status must be checked and confirmed prior to the person commencing permanent employment within NSW Health.

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

Any changes to the duties of a position need to be reflected in an amended position description/role description which is signed by the incumbent and placed on the relevant personnel file.

2.24 Process summary

A checklist, summarising the recruitment and selection process, is at Appendix 1.10.
LIST OF ADDITIONAL MODULES

As well as the minimum standards specified in Module One, certain employment groups have additional, modified or differing standards that must be met when filling a position in that particular group. Any such standards 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 standards in both Module One and the additional Module must be met.

<table>
<thead>
<tr>
<th>Module number</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Module 2</td>
<td>Recruitment and Selection of Staff of the NSW Health Service -</td>
</tr>
<tr>
<td></td>
<td>Additional Standards for Staff Specialists and Clinical Academics.</td>
</tr>
<tr>
<td>Module 3</td>
<td>Rescinded</td>
</tr>
<tr>
<td>Module 4</td>
<td>Recruitment and Selection of Staff of the NSW Health Service –</td>
</tr>
<tr>
<td></td>
<td>Additional Standards for Junior Medical Officer Annual Recruitment</td>
</tr>
<tr>
<td></td>
<td>Campaign.</td>
</tr>
</tbody>
</table>

*Additional Modules may be added to this list from time to time.*
LIST OF APPENDICES

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

<table>
<thead>
<tr>
<th>Appendix number</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appendix 1.1</td>
<td>Critical actions for casual or temporary employment under 13 weeks</td>
</tr>
<tr>
<td>Appendix 1.2</td>
<td>Identifying and managing vacancies</td>
</tr>
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<td>Appendix 1.3</td>
<td>Timeframe for standard recruitment and selection processes</td>
</tr>
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<td>Appendix 1.4</td>
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<td>Appendix 1.8</td>
<td>Template letter of offer</td>
</tr>
<tr>
<td>Appendix 1.9</td>
<td>Retention of recruitment and selection records</td>
</tr>
<tr>
<td>Appendix 1.10</td>
<td>Recruitment checklist</td>
</tr>
</tbody>
</table>

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](http://internal.health.nsw.gov.au/jobs/recruitment/index-recruit.html).
MODULE 1

Appendix 1.1

Critical actions for casual or temporary employment for under 13 weeks

While the recruitment and selection processes contained in Module One do not generally apply to casual or temporary vacancies under 13 weeks, it is still essential to ensure that positions which require filling are identified and action to fill them commenced.

Potential appointees to casual or temporary positions must be able to perform the duties of the position, and be a fit and proper person to be offered the position.

The following actions must occur when a short term vacancy is identified:

☐ Managers undertake and document an assessment to determine whether the position needs to be filled. Factors to be considered include service provision requirements and impact on the workload of other staff.

The following critical actions must be conducted, and documented, prior to the offer of any casual or temporary employment:

☐ Review position information to ensure it is still current and can be used as an accurate basis for the assessment of suitability of potential appointees.

☐ Review options for filling the position, eg temporary redeployment of injured and/or displaced employees, developmental opportunities for existing staff, agency staff etc.

☐ Request and assess information from potential candidate(s) against position information to ensure their suitability to undertake the duties of the position.

☐ Undertake referee checking, including with a current supervisor.

☐ Conduct an internal service check (via the NSW Health Service Check Register).

☐ Ensure all required evidence has been sighted and where required copied or details recorded, as outlined in Module One (eg 100 point identity check, citizenship or residency status, immunisation status, professional qualifications, medical indemnity etc) as required for the position, and that any professional licence or registration status has been confirmed directly with the registration/licensing authority.

☐ Sight and record Working with Children Check number, where work is child related and a check is required.

☐ Collect mandatory declarations and signed consent forms eg Applicant Declaration and National Criminal Record Check consent form and undertake checks, as appropriate.

☐ Assess outcome of any verification/employment checks and initiate action as appropriate.

☐ Make the job offer.

☐ If accepted, make sure that all recruitment and selection documentation is retained.

For staff specialist and clinical academic positions, ensure that the required sections of the Critical Actions Compliance Declaration are completed (Appendix 2.1 of Module Two).

For locum medical officers see the current NSW Health policy on locum medical officers.
Appendix 1.2

Identifying and managing vacancies

All managers in facilities, or of community and community mental health services, should be fully aware of the staffing situation and vacancies in wards, units etc under their responsibility.

This includes notification of:

- Impending transfers, both in and out;
- Resignations and terminations upon receipt; and
- Positions held for appointees who have been appointed but are yet to commence duties in the ward/unit etc.

Routine internal rotations of staff should also be represented in reports of employment and vacancies. In addition, the Full Time Equivalent (FTE) required for each ward, unit etc should be regularly reviewed in response to changes in activity.

This will assist in ensuring that at all times the current staffing situation and predicted FTE vacancy is clearly documented and available, to expedite a streamlined recruitment process. This process should not delay any recruitment of frontline staff.

NSW Health organisations should regularly monitor and review positions that impact on frontline 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 the classification and grading requires change, recruitment and selection action to fill a vacant frontline position on a permanent or temporary basis (as appropriate) should commence without delay, ie as soon as a vacancy is impending.
## Time frames for standard recruitment and selection process

<table>
<thead>
<tr>
<th>ACTION</th>
<th>Time Frame</th>
<th>STRATEGIES TO SPEED UP ACTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Review position description/role description and selection criteria and update as necessary.</td>
<td>5 Days</td>
<td>Create generic position descriptions/role descriptions for groups of jobs, where appropriate.</td>
</tr>
<tr>
<td>Seek approval to fill the position.</td>
<td>5 Days</td>
<td>Electronic approval OR standard approval forms with all required information on one page.</td>
</tr>
<tr>
<td>Prepare and place advertisement.</td>
<td>10 Days</td>
<td>Delegate authority to approve to lowest level practicable and avoid multiple approvals, particularly for frontline positions.</td>
</tr>
<tr>
<td>Finalise job information package.</td>
<td>5 Days</td>
<td>Establish a central point for a list of injured workers and eligibility lists.</td>
</tr>
<tr>
<td>Obtain approval to fill position – this must take no longer than 10 days from the time approval is sought to fill the position.</td>
<td>5 Days</td>
<td>Standard advertisement template + standard job information package.</td>
</tr>
<tr>
<td>Explore redeployment, eligibility lists, and other options for filling the vacancy without advertising.</td>
<td>5 Days</td>
<td>Establish selection committee as soon as advertisement has been placed, book cull date and interview dates.</td>
</tr>
<tr>
<td>Prepare all recruitment related documentation.</td>
<td>5 Days</td>
<td>Have a standard recruitment kit of all recruitment related documentation for all positions.</td>
</tr>
<tr>
<td>Advertisement appears/closes.</td>
<td>5 Days</td>
<td>Collate as soon as applications close.</td>
</tr>
<tr>
<td>Confirm selection panel membership.</td>
<td>5 Days</td>
<td>Mail, email or courier copies of applications to committee members, then cull over the phone.</td>
</tr>
<tr>
<td>Schedule interviews/tests/assessments.</td>
<td>5 Days</td>
<td>Where practical, book everything in for the same day. Leave time for panel to deliberate afterwards.</td>
</tr>
<tr>
<td>Conduct interviews/tests/other assessments.</td>
<td>5 Days</td>
<td>Ensure at interview that applicant has properly completed and submitted all required forms.</td>
</tr>
<tr>
<td>Decide on preferred applicant(s) and eligibility list.</td>
<td>5 Days</td>
<td>Confirm referee information, contact details and availability.</td>
</tr>
<tr>
<td>Conduct referee checks.</td>
<td>5 Days</td>
<td>Ensure all necessary documentation/information is provided to the delegated officer.</td>
</tr>
<tr>
<td>Make recommendation and sign off Selection Committee Report.</td>
<td>5 Days</td>
<td>Delegate authority to approve as far down the management line as practicable.</td>
</tr>
<tr>
<td>Conduct internal service check.</td>
<td>5 Days</td>
<td>Assess outcomes of all employment screening/checking as soon as available.</td>
</tr>
<tr>
<td>Initiate employment checks, including verification of Working With Children Check.</td>
<td>5 Days</td>
<td>Make the job offer/s.</td>
</tr>
<tr>
<td>Conduct relevant health/immunisation screening and assessment.</td>
<td>5 Days</td>
<td>Advise unsuccessful applicants.</td>
</tr>
<tr>
<td>Finalise record keeping.</td>
<td>5 Days</td>
<td>Finalise record keeping.</td>
</tr>
</tbody>
</table>

- 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 positions where delineation of the scope of practice is required may necessarily take longer.
Appendix 1.4

Considering late applications

A convenor may decide to accept late applications in certain limited circumstances.

If a selection committee has already been convened, the convenor may wish to discuss the acceptance of late applications with the selection committee members. Any decision must be applied fairly to all late applications.

Unless there are exceptional circumstances, late applications are not to be accepted after interviews have started.

When deciding whether it is appropriate to accept a late application, some of the relevant facts to be considered include:

- The reason for the late application
- Whether the application was sent before the closing date
- Whether the applicant obtained an extension from the convenor prior to the closing date
- The quality of the field of applicants and the likelihood of being able to fill the position.

A record must be kept of any decision and reasons to accept/not accept a late application.
Convenor’s Checklist
To be completed prior to any recommendation to appoint

Before any recommendation is made to a decision maker to appoint an applicant to a position, the convenor is responsible for ensuring that the following actions have occurred in relation to the recommended applicant(s) (for staff specialist and clinical academic positions, use the critical action compliance checklist (Appendix 2.1 of Module Two). This completed Checklist should be retained with the recruitment and selection papers.

- Documentation for 100 Point Identification Check, including citizenship/residency/visa status has been sighted and the details recorded on the NSW Health 100pt Identification Check Form.
- Vaccination record or Certificate of Compliance sighted and copied or collection of the New Recruit Undertaking/Declaration Form/IB Assessment, as required by the position (note for JMO Annual Recruitment details must be recorded rather than copies taken).
- The originals of any educational, trade, professional or academic qualifications listed as selection criteria are sighted, copied, certified by the NSW Health organisation and retained (there is no need to sight qualifications used to gain registration).
- Any minimum length of experience specified in the selection criteria is confirmed (if not already verified through referee checking).
- Eligibility for identified or targeted positions is confirmed, as required.
- Registration/licence status has been directly confirmed with the licensing/registering authority and any related risk assessment activities have been completed.
- Membership/eligibility for membership of medical/professional boards, colleges or association etc (where required) has been confirmed with the relevant body.
- Internal service check search (via the NSW Health Service Check Register) and any related risk assessment activities have been completed.
- Any additional position specific checks deemed necessary have been conducted eg Health Care Complaints Commission and any related risk assessment activities have been completed.
- At least two referee checks have been conducted, in line with the standards in this Module.
- A National Criminal Record Check form has been collected from the recommended applicant(s)
- Working with Children Check clearance number has been verified with the Children’s Guardian and appropriate records are kept – refer to the current NSW Health policy on employment checks for further details and exemptions
- Declaration on authority to prescribe, supply, dispense or administer prescribed restricted substances and/or drugs of addiction has been completed by the applicant, where relevant, and details of any restrictions have been checked and assessed to determine the ability of the applicant to undertake the duties of the position (see section 2.13 of this Module).
Recruiting Aboriginal people into the NSW Health Service

- **Recruitment and Selection Training: Respecting the Difference**

  Convenors and panel members should have undertaken the available *Respecting the Difference Aboriginal Cultural Training Program* 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
  - The NSW Health Code of Conduct
  - The NSW Health CORE values
  - Closing the Gap and patient care outcomes
  - Closing the Gap and Aboriginal employment and economic development outcomes.

  Additional support is available for managers undertaking recruitment activities through the *Stepping Up* online recruitment and retention resource.

- **Definitions**

  **Identified position:** An identified position is one where Aboriginality is a genuine occupational qualification.

  Typically, such positions work directly with Aboriginal people and are involved in developing and/or delivering services and programs which have an impact on Aboriginal people and/or involve dealing with Aboriginal communities.

  Aboriginal cultural knowledge may be a core requirement of the position and the job requirements should be assessed during planning of a potentially identified position. Such an assessment may include whether the position holder should:
  - Have knowledge of Aboriginal and/or Torres Strait Islander cultures and communication protocols in order to be effective
  - Have an awareness and understanding of the sensitivities of Aboriginal culture and current issues affecting Aboriginal communities
  - Have experience in effective cross-cultural communication
  - Develop, implement and administer policies, services and programs which have an impact on Aboriginal people
  - Deliver programs and services through an ongoing transfer of Aboriginal cultural knowledge, skills and practice to deliver programs to support Aboriginal and non-Aboriginal employees.

  For identified positions the following statement should be included in the job advertisement: *In this role Aboriginality is a genuine occupational qualification and is authorised by section 14(d) of the Anti-Discrimination Act 1997.*
Appendix 1.6 continued

Targeted position: A targeted position is a ‘mainstream’ position which is filled using advertising and recruitment strategies that maximise applications from Aboriginal people. Aboriginal cultural knowledge is not an essential occupational qualification for targeted positions and therefore is not a compulsory requirement of the applicant.

For targeted positions the following statement should be included in the job advertisement: Aboriginal people are encouraged to apply and, where found suitable, will be given higher priority. Aboriginal applicants may have to cite their Aboriginality in addition to the selection criteria.

Further information can be sought from the relevant NSW Health organisation’s Aboriginal Employment Coordinator or Manager of Aboriginal Workforce Development.

- **Citing Aboriginality**

  Applicants for identified positions will be required to cite 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 for people in these situations. 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.

  For applicants unable to access documentation from their Local Aboriginal Land Council or other incorporated Aboriginal organisation, consideration should be given to providing 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 have worked, 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:

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

  For further information please refer to the *Stepping Up* online recruitment and retention resource or the ‘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.
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 candidate's 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.
## Appendix 1.7

### Referee checks

- At least two reference checks are to be conducted prior to any recommendation to appoint (one reference check may suffice for employment for one week or less).
- At least one referee should be a current supervisor.
- The identity of the referee, position title and relationship to the applicant is to be confirmed.
- Referees should be asked to confirm that they will provide an honest, accurate and complete response to each question.
- Referees are to be advised that the information they provide may form part of the selection committee report, which may be used in providing feedback to the applicant.
- The selection criteria is to be provided to referees.
- A set of questions is to be prepared that includes (but is not limited to) the following:

1.0 *How would you describe the applicant’s skills/ experience/competence (as appropriate) in relation to the selection criteria/position?*

2.0 *Would you re-employ the applicant if the opportunity arose?*

   *Why/why not?*

3.0 *Are you aware of any professional conduct or past performance issues that may be relevant and appropriate for us to consider?*

4.0 *In light of the information provided about the position, is there anything else you think would be relevant for us to consider?*
Appendix 1.8

Letter of offer of employment

The following information is provided as guidance when developing letters of offer of employment:

**CHECKLIST OF CONTENT TO BE INCLUDED:**

- **Introduction:** I am pleased to offer you employment in the [Name of NSW Health organisation], 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 also be governed by [award/industrial instrument].

- **Duties:** Your position will involve the duties set out in the attached position description/role description. You will also be expected to have a flexible approach to your duties and perform such other 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.

- **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.

- **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].

- **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 Code of Conduct.

- **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 other conditions of employment. See checklist further below.]

- **Confirmation of acceptance and contact person:** Please confirm your acceptance by signing and returning the enclosed copy of this document to [insert details]. Any questions may be directed to this person.

- **Signatory:** [name], Chief Executive, [NSW Health organisation] for Secretary, NSW Ministry of Health.

I [insert proposed employee’s name] accept the offer in accordance with the term and conditions outlined in this letter.

Signature / Date
Appendix 1.8 continued

NON-EXHAUSTIVE CHECKLIST OF OTHER MATTERS TO BE CONSIDERED:

☐ **Reporting requirements**: reporting directly to [position/name of person] or otherwise as required by the employer.

☐ **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 and may be withdrawn eg clearly identify any conditional arrangements such as the provision of a private use motor vehicle.

☐ **Visa requirements**: any statement about 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]).

☐ **Any requirements to maintain current registration, licences, Working With Children Checks etc.**

☐ **Legislative notifications to be given by the employer**: any notifications required by legislation that apply to the employment eg workplace surveillance

☐ **Notifications to be made by the employee**: such as changes to their registration status including additional conditions, complaints to the HCCC etc

☐ **Provisional appointment**: a statement relating to provisional appointment pending satisfactory National Criminal Record Check clearance or Working With Children Check clearance, where relevant (see current NSW Health policy on [employment checks]) and

☐ **Withdrawal of offer of employment**: circumstances where the offer of employment may be withdrawn.
### RETENTION OF RECRUITMENT AND SELECTION RECORDS

(records can be hard copy or electronic where eRecruit is implemented)

<table>
<thead>
<tr>
<th>Action</th>
<th>Minimum Retention Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Selection process documentation (including unsuccessful applications and offers of employment which were not accepted)</td>
<td>✓ 2 years after recruitment finalised, then destroy (But note differing retention period for any criminal history received in response to a NCRC).</td>
</tr>
<tr>
<td>• Advertisement and job information (incl. position/role description and selection criteria)</td>
<td>✓ 2 years after recruitment finalised, then destroy (But note differing retention period for any criminal history received in response to a NCRC).</td>
</tr>
<tr>
<td>• Selection committee report or report of selection on other grounds (signed by approving officer), including any completed Convenor’s Checklist/Critical Actions Compliance Declaration</td>
<td>✓ 2 years after recruitment finalised, then destroy (But note differing retention period for any criminal history received in response to a NCRC).</td>
</tr>
<tr>
<td>• Eligibility list</td>
<td>✓ 2 years after recruitment finalised, then destroy (But note differing retention period for any criminal history received in response to a NCRC).</td>
</tr>
<tr>
<td>• Records of any internal process reviews</td>
<td>✓ 2 years after recruitment finalised, then destroy (But note differing retention period for any criminal history received in response to a NCRC).</td>
</tr>
<tr>
<td>• Selection documentation related to each unsuccessful applicant or applicant who has not accepted an offer of employment</td>
<td>✓ 2 years after recruitment finalised, then destroy (But note differing retention period for any criminal history received in response to a NCRC).</td>
</tr>
<tr>
<td>o Full application including resume, any written references and any other supporting information</td>
<td>✓ 2 years after recruitment finalised, then destroy (But note differing retention period for any criminal history received in response to a NCRC).</td>
</tr>
<tr>
<td>o Any supplementary information subsequently provided</td>
<td>✓ 2 years after recruitment finalised, then destroy (But note differing retention period for any criminal history received in response to a NCRC).</td>
</tr>
<tr>
<td>o Any declarations and consent forms signed by the applicant (including any Health Declarations by any recommended applicants subsequently not employed *)</td>
<td>✓ 2 years after recruitment finalised, then destroy (But note differing retention period for any criminal history received in response to a NCRC).</td>
</tr>
<tr>
<td>o 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)</td>
<td>✓ 2 years after recruitment finalised, then destroy (But note differing retention period for any criminal history received in response to a NCRC).</td>
</tr>
<tr>
<td>o 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 within the eRecruit system. 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.</td>
<td>✓ 2 years after recruitment finalised, then destroy (But note differing retention period for any criminal history received in response to a NCRC).</td>
</tr>
<tr>
<td>o For any overseas / aged care applicants, copy of any signed statutory declaration and/or overseas police certificate</td>
<td>✓ 2 years after recruitment finalised, then destroy (But note differing retention period for any criminal history received in response to a NCRC).</td>
</tr>
<tr>
<td>o Record of any risk assessments arising from a Service Check Register check or a National Criminal Record Check, and associated records *</td>
<td>✓ 2 years after recruitment finalised, then destroy (But note differing retention period for any criminal history received in response to a NCRC).</td>
</tr>
<tr>
<td>o 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 *</td>
<td>✓ 2 years after recruitment finalised, then destroy (But note differing retention period for any criminal history received in response to a NCRC).</td>
</tr>
<tr>
<td>o Copy of any advice provided to the applicant re the outcome of the selection process</td>
<td>✓ 2 years after recruitment finalised, then destroy (But note differing retention period for any criminal history received in response to a NCRC).</td>
</tr>
<tr>
<td>2. Successful applications</td>
<td>✓ 75 years after date of birth or 7 years after employment ceases, whichever is longer, then destroy.</td>
</tr>
<tr>
<td>• Job information (including position description/role description and selection criteria)</td>
<td>✓ 75 years after date of birth or 7 years after employment ceases, whichever is longer, then destroy.</td>
</tr>
<tr>
<td>• Full application including resume and any written references</td>
<td>✓ 75 years after date of birth or 7 years after employment ceases, whichever is longer, then destroy.</td>
</tr>
<tr>
<td>• Completed confirmation of selection panel membership</td>
<td>✓ 75 years after date of birth or 7 years after employment ceases, whichever is longer, then destroy.</td>
</tr>
<tr>
<td>• Written record of information obtained via referee checks</td>
<td>✓ 75 years after date of birth or 7 years after employment ceases, whichever is longer, then destroy.</td>
</tr>
<tr>
<td>• Written record of past performance checks and any significant findings</td>
<td>✓ 75 years after date of birth or 7 years after employment ceases, whichever is longer, then destroy.</td>
</tr>
</tbody>
</table>

* Retain on a separate, confidential file kept in a secure location and accessible only to authorised staff.
### Appendix 1.9 continued

- Appropriately signed Convenor’s Checklist/Critical Actions Compliance Declaration (see [Appendix 2.1](#) for staff specialist and clinical academic positions or [Appendix 1.5](#) for all other positions)

| Documentation confirming citizenship/residency or working visa status (included in the 100 point ID checklist form – see under records relating to employment checks requirements) |
| Copy of registration/license 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 (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 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 |

*Note: If criminal history is indicated, the declaration must be maintained with the risk assessment documents.*

75 years after date of birth or 7 years after employment ceases, whichever is longer, then destroy.

(But note differing retention period for any criminal history received in response to the NCRC).

*Retain on a separate, confidential file kept in a secure location and accessible only to authorised staff.*
### Appendix 1.9 continued

| o Overseas / aged care - Signed statutory declarations or copies of overseas police certificates stating the applicant has no criminal history  
*Note: If criminal history is indicated, the declaration must be maintained with the risk assessment documents* * |
|---|
| o 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.  
*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.* |
| o 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.  
*Note: No details of an applicant’s criminal history received as a response to a National Criminal Record Check should be recorded or maintained within the eRecruit system. 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.* |
| o Any records relating to a risk assessment arising from a National Criminal Record Check (incl. correspondence from ESRU, contact with applicant, recommendations and outcomes) * |

#### 3. Copies of documentation that, as a minimum, must be placed on the successful applicant’s Personnel File

| Position/role description | ✓ |
| Selection criteria | |
| Completed confirmation of selection committee membership | |
| Completed and signed 100-point ID Checklist form | |
| Documentation confirming citizenship/residency or working visa status (ie the completed 100-point ID Checklist form) | |
| Copy of registration/license 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, as relevant. | |
| Evidence of medical indemnity cover, where required | |
| 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 / aged care: Signed statutory declaration or copies of overseas police certificates stating the applicant has no criminal history  
*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.* | |
| 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.
## RECRUITMENT AND SELECTION PROCESS CHECKLIST

**Review of position information**
- Review and update all position information.
- Identify / review inherent job requirements.
- Develop / review selection criteria (based on the inherent job requirements).

**Advertising**
- Explore redeployment of injured and/or displaced employees.
- Review any appropriate eligibility list(s).
- Review further options for filling the vacancy without advertising.
- Decide how and where to advertise (internal/external, rolling advertisements, specialist media etc).
- Prepare advertisement and job information package (incl. contacts for information).
- Place the advertisement.
- If using a recruitment consultant, seek appropriate approval and arrange for a contract detailing roles and responsibilities.

**Application management**
- Provide applicant information kits and any further information to applicants as necessary.
- Date receipt of applications and acknowledge receipt to applicants.
- If selection process delayed, advise applicants.
- Review applications and follow up on any missing information.
- Collate applications for the convenor (incl. any late applications but note lateness).

**Selection process**
- Convene selection panel.
- Cull applications.
- If the field is not reasonable, consider and decide on further options (eg re-advertise, use a recruitment consultant, leave position vacant).
- Determine what methods will be used to assess the suitability of applicants.
- Schedule interviews, tests, assessments and advise applicants.
- Conduct interviews, tests, assessments etc.
- Ensure all required evidence has been sighted, and details recorded or copied as required (eg identity, citizenship or residency status, immunisation status, professional qualifications, professional registration/license status etc).
- Verify information provided by the applicant.
- Check registration/licence status directly with the registering/licensing authority.
- Review each applicant’s relative merit for the position (based on selection criteria)
- Conduct referee checks on at least the preferred applicant(s), assess results.
- Initiate other external checks eg HCCC if required for the preferred applicant.

**Checks on preferred applicant**
- Initiate the relevant health assessment of the preferred applicant(s), if applicable.
- Assess outcomes of any health assessment.
- If required, consider reasonable adjustment in line with current Government policy on [employment health assessment](#).
- Conduct internal Service Check Register (SCR) check and undertake risk assessment, if required.
- Verify Working With Children Check number with the Children’s Guardian.
- Initiate National Criminal Record Check, as appropriate (check for completed NSW Health Criminal History Declaration).
- Where necessary, conduct risk assessment on any criminal history identified.

**Finalising the selection**
- Match successful applicant(s) with available positions (bulk recruitment).
- Make recommendations for appointment and eligibility list.
- Following selection decision by Chief Executive or delegate, make job offer(s).
- If declined, initiate relevant verification and employment checking actions for next person on the eligibility list.
- If accepted, refer to the appointment process.
- Advise unsuccessful applicants that their application was not successful and who the successful applicant was, and provide feedback as required.
- Document all steps of the recruitment process and retain records.

**Complaints**
- Conduct initial assessment of complaint.
- Conduct process review if necessary.
- Maintain documentation.
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1 BACKGROUND

1.1 Purpose of Module Two

The purpose of this Module is to outline the specific additional, modified or differing requirements that exist when recruiting and selecting staff specialists and clinical academics and determining their clinical privileges/scope of clinical practice. Module One remains the primary source of standards for all recruitment and selection for employment in the NSW Health Service.

1.2 Relationship to other policies

As far as practicable all recruitment, selection, clinical privileges/scope of clinical practice and appointment related policy requirements for staff specialists have been incorporated into this Module. However a small number of other key, subject specific policies and arrangement will need to be considered alongside this Module, as identified below:

- **Delineation of Clinical Privileges for Visiting Practitioners and Staff Specialist PD2005_497**
- **Clinical Academics Employed in the NSW Health Service PD2010_036**


1.3 Definitions

**Area of need** - Refers to a medical position, not a geographical location that has been so designated by the NSW Ministry of Health. A medical position may be designated an ‘area of need’ if certain criteria are met which indicate there is major difficulty recruiting medical practitioners from within Australia. Area of need status enables NSW Health agencies to recruit suitably qualified overseas-trained medical practitioners to positions.

**By-laws** – Pursuant to sections 39, 60 and 63 of the *Health Services Act 1997* a public health organisation may, with the approval of the Secretary, NSW Health, make by-laws, not inconsistent with the Act or the regulations.

**Credentials** - Means the documented evidence of an individual’s formal qualifications, training, experience and clinical competence.

**Credential (Clinical Privileges) Subcommittee** - Is established by the Medical and Dental Appointments Advisory Committee to advise on matters concerning the clinical privileges given to an applicant or practitioner.

**Interview Subcommittee** - The MDAAC commonly establishes an interview subcommittee to review all applications, select applicants for interview, interview suitable applicants, undertake reference checking, verify credentials and make recommendations to MDAAC in relation to appointments.

**Medical and Dental Appointments Advisory Committee (MDAAC)** - MDAAC is a committee of a NSW Health organisation that provides advice to the chief executive on the appointment of staff specialists and the clinical privileges that should be granted to those persons.
Medical practitioner - Means an individual registered under the Health Practitioner Regulation National Law (NSW).

Clinical Privileges/Scope of Clinical Practice - Means the kind of work (subject to any restrictions) that the NSW Health organisation determines a medical practitioner or dentist is to be allowed to perform at any of its facilities. The clinical privileges/scope of clinical practice results from the credentialing process and represents the range and clinical privileges/scope of clinical responsibility that may be exercised by an individual in a facility. The clinical privileges/scope of clinical practice is specific to an individual, and also relates to the role delineation, resources, equipment and staff available in a single facility or group of facilities.

Staff Specialist - Means a medical practitioner who is 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 RECRUITMENT AND SELECTION STANDARDS

2.1 Vacancy identified

Section 2.1 Module One outlines requirements for responding to identified vacancies.

2.2 Review position documentation

Section 2.2 Module One outlines requirements for reviewing position documentation.

2.3 Action prior to advertising

Section 2.3 Module One outlines requirements for action to be taken prior to advertising.

2.4 Employment without advertising

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).

2.5 Advertising requirements

Refer to the advertising requirements outlined in Section 2.5 in Module One.
2.6 Position information package

Section 2.6 in Module One outlines the requirements for information packages. Additionally information packages for staff specialist and clinical academic positions must include the requirement for the applicant to provide:

- A statement setting out employment and the clinical privileges/scope of clinical practice held at any other NSW Health organisation or other health service provider, and a statement setting out the clinical privileges/scope of clinical practice sought by the applicant.
- An authority to allow the MDAAC to obtain information as to the applicant’s past performance as a medical practitioner.
- A statement of 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.

2.7 Approval to engage a recruitment consultant

The process for seeking approval to utilise recruitment consultants is outlined in Section 2.7 of Module One.

2.8 Application management

Section 2.8 of Module One outlines the standards for application management.

2.8.1 Role of the MDACC

MDACC is a committee of the NSW Health organisation that has the function of advising the chief executive, or delegate, in relation to the employment of a person as a staff specialist and the clinical privileges/scope of clinical practice that should be granted.

Applications for permanent staff specialist positions, or for temporary positions over 3 months, must be in writing and must be referred to MDAAC, and in turn to a Credentials (Clinical Privileges) Subcommittee.

In recruitment and selection activities the function of MDAAC is to provide the decision maker with advice and recommendations on suitable applicants for staff specialist positions.

While the Chief Executive, or delegate, is ultimately responsible and accountable for the employment decision, advice and recommendations from MDAAC must form part of the information to be considered.

2.9 Selection process

The selection process leading to employment as Staff Specialist within a NSW Health organisation will include:

- 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 verifications
• Determining the clinical privileges/scope of clinical practice and
• Making a resulting recommendation to the chairperson of the MDAAC.

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

2.9.1 Interview subcommittee

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.

Section 2.9.1 of Module One outlines the basic requirements for interview subcommittees (referred to as selection panels). Interview subcommittees for staff specialist positions 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.

2.9.2 Role of the convenor

The convenor is responsible for ensuring that:

• All relevant NSW Health standards are met during the selection process, as specified in Module One and this Module

The required sign off occurs, confirming all critical actions have taken place, prior to the appointee commencing work (see Appendix 2.1).

2.9.3 Role of the independent

Section 2.9.3 of Module One outlines the standards for identifying independent members of interview subcommittees.

2.9.4 Conducting the cull

Section 2.9.4 of Module One provides the standards for culling applications.

2.9.5 Further assessment of applicants (including for Area of Need positions)

Section 2.9.5 of Module One provides standards for assessing applicants. For Area of Need positions, there should be a specific assessment of the applicant’s clinical competence and/or medical knowledge.
2.9.6 The interview process

Section 2.9.6 of Module One outlines the requirements for the interview process. In addition to the requirements outlined in Module One, convenors must:

- Sight and check medical indemnity cover, where required
  Confirm eligibility to practice as a specialist or general practitioner, as relevant.

2.10 Determine preferred applicants

When the assessment process has been completed, the panel must analyse all information and identify preferred applicant(s) for the position. It is usually at this point that referee checks are conducted, and any outstanding verification/checking activities are completed.

2.11 Verify information

Appendix 2.1 outlines the critical information that must be verified prior to any recommendation being made for permanent employment and temporary employment over one week (refer to section 2.11.1 of this Module for requirements for temporary employment less than one week).

All the relevant information about an 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 will not be sufficient to meet the standards reflected in Module One or this Module.

2.11.1 Temporary employment under 1 week

Where the temporary appointment of a staff specialist is for a period not exceeding one week, the Chief Executive or the 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 established 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 employment checks).
- Registration status has been confirmed directly with the Australian Health Practitioners Regulation Agency, including the identification of any practice conditions
- Evidence of medical indemnity cover sighted, where required
- At least one referee check has occurred
- 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 must be completed (see Appendix 2.1) and the Declaration signed by the Chief Executive or the 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 must be completed (see Appendix 2.1), however refer to section 2.11.4 below for requirements for re-verifying information.

For standards relating to determining the clinical privileges/scope of clinical practice for temporary appointments refer to section 2.13 below.

2.11.2 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 employment checks). If the reference check with a current employer is unable to be completed in an emergency situation prior to a shift commencing, and registration status and identification have been verified, the matter should be escalated to the Chief Executive who may approve the appointment. The reference check must then be completed as soon as possible and the appropriateness of the appointment confirmed and documented.

2.11.3 Documentary evidence of verification

Documentary evidence that all relevant checks took place, and any findings of significance, must form part of the selection documentation. Additionally the relevant section of a Critical Actions Compliance Declaration should be completed by the Convenor, or in the case of temporary employment, the delegated authority (see Appendix 2.1).

2.11.4 Re-verifying information for temporary employment

Other than criminal record checks, initial checks are not required to be repeated for a future 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 or there is reason to suggest that any relevant circumstances of the individual have changed.

2.12 Conduct referee checks

Section 2.12 of Module One outlines the requirements for referee checking.

2.13 Determining clinical privileges/scope of clinical practice

The Credentials (Clinical Privileges) Subcommittee is established by MDAAC to advise it on matters concerning clinical privileges/scope of clinical practice, including the clinical privileges/scope of clinical practice to be allowed to an applicant or 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. It is a requirement however that the Credentials (Clinical Privileges) Subcommittee membership includes a medical practitioner from the relevant speciality/sub-speciality in which the clinical privileges/scope of clinical practice is sought.
Determining the clinical privileges/scope of clinical practice must occur as part of the recruitment and selection process. This process is to assess a staff specialist’s ability to provide defined clinical services and to match that with the role delineation of the relevant facility as well as staffing, facilities equipment and support services available at the facility.

The Credentials (Clinical Privileges) Subcommittee must therefore have regard to the following information to assist them in determining the scope of clinical practice:

- 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 documentation submitted in support of the application.

Critical action items 2.1 and 2.2 (see Appendix 2.1) must be signed off by the chairperson.

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.

2.13.1 Determining clinical privileges/scope of clinical practice for 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. There is a difference however in the registration of such applicants.

NSW Health agencies must submit the applicant’s determined clinical privileges/scope of clinical practice to the registration board for assessment. Restrictions can be placed on practitioners working in Area of Need positions in which case regular assessment and monitoring of compliance with such conditions is required.

2.13.2 Timing

There is no requirement about the timing of the referral of applicants to the Credentials (Clinical Privileges) Subcommittee in the course of the recruitment and selection process. This can be done prior to interview to ensure that an applicant who cannot undertake the role required by the facility is not recommended for appointment.

Where this process occurs prior to interviews being conducted, 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 similar, it may be preferable to ensure they convene consecutively.

2.14 Assessing information

Section 2.13 of Module One provides standards for assessing information and conducting risk assessments where necessary.
2.15 Making recommendations

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 make 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, at least on request, to the MDAAC:

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

The Chairperson of MDAAC in turn makes a recommendation to the Chief Executive or the properly delegated decision maker on the preferred applicant(s) for appointment, and on any eligibility list created. The Chairperson must also complete the relevant sections of the Critical Actions Compliance Checklist confirming that the required critical actions have been undertaken prior to the recommendation being made (see Appendix 2.1).

2.15.1 Recommended applicant

Section 2.14.1 of Module One outlines the requirements for recommending an applicant.

2.15.2 Eligibility list

Section 2.14.2 of Module One provides standards for the creation of eligibility lists.

2.15.3 Australian citizenship/residency considerations

Any recommendation must take into account the considerations on Australian citizenship outlined in Section 2.14.3 of Module One.

2.15.4 Alternative and minority reports

Section 2.14.4 of Module One outlines requirements where a panel is not able to reach a unanimous decision.

2.16 Approval to appoint

If the decision maker overturns a MDAAC recommendation, this must be documented in a manner that clearly explains the decision making process and that can be reviewed in the event of a complaint.
2.17 Make the formal job offer

Once all mandatory standards in this and any other relevant Modules have been met, and the Chief Executive or delegated decision maker has completed the relevant sections of the Critical Actions Compliance Checklist (see Appendix 2.1), a formal offer of employment may be made to the successful applicant(s).

For appointment standards refer to Section 3 of this Module.

Overseas trained medical practitioners are not to be offered permanent employment in positions granted Area of Need status given that Area of Need status is for a time limited period only, and an extension cannot be guaranteed regardless of whether the position is occupied.

Accordingly, when an overseas trained medical practitioner is to be appointed to an Area of Need position, their letter of offer and any employment documentation needs to include advice that the position is of a temporary nature only. The contract duration should be no greater than the life of the existing Area of Need certificate.

Employers 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.

2.17.1 Where an offer is declined

Where the successful applicant declines the offer, critical actions (see Appendix 2.1) should be initiated for the next ranked applicant.

2.18 Meeting visa requirements

Sections 2.14.3 and 2.18 of Module One outline information relevant to meeting visa requirements.

2.19 Advise unsuccessful applicants

Section 2.19 of Module One outlines standards for advising unsuccessful applicants.

2.19.1 Post-selection feedback

Section 2.20 of Module One outlines standards for post selection feedback.

2.20 Documentation and retention of records

Section 2.21 of Module One outlines the standards for retention of records relating to the recruitment and selection process.

2.21 Complaints managements

Section 2.22 of Module One outlines information relevant to reviewing recruitment and selection decisions.

2.22 Commencing work

Section 2.23 of Module One outlines the standards relating to commencing work.
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.

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 job description/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 Appendix 1.8 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, 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 the person is 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 (see the current NSW Health policy on staff specialist rights of private practice arrangements). 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.


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 in 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.

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

Sections 2.6 of Modules One and Two outline the information to be provided to potential applicants who seek a clinical role within NSW Health.

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 Module One and sections 2.11, 2.12 and 2.14 of this Module) and determination of clinical privileges 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.
LIST OF APPENDICES

Module Two is supported by Appendices as follows:

<table>
<thead>
<tr>
<th>Appendix number</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appendix 2.1</td>
<td>Critical Actions Compliance Declaration</td>
</tr>
</tbody>
</table>

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.
<table>
<thead>
<tr>
<th>Task Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Chair, Interview Subcommittee must confirm all critical actions, or Authorised Decision Maker to approve short-term temporary appointment over one week, but less than 3 months, must confirm critical actions 1.1 to 1.14, or Authorised Decision Maker to approve short-term temporary appointment of less than one week must confirm critical actions 1.1 to 1.8.</td>
</tr>
<tr>
<td>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 employment checks.</td>
</tr>
<tr>
<td>1.2 NSW Health National Criminal Record Check form has been collected in accordance with the current NSW Health policy on employment checks.</td>
</tr>
<tr>
<td>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.</td>
</tr>
<tr>
<td>1.4 Registration, including existence of any conditions on registration, was verified independently through the AHPRA website.</td>
</tr>
<tr>
<td>1.5 Evidence of medical indemnity cover has been sighted and checked, where required.</td>
</tr>
<tr>
<td>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 Service Check Register.</td>
</tr>
<tr>
<td>1.7 At least two reference checks were conducted (one reference check can be sufficient for appointments of less than 3 months).</td>
</tr>
<tr>
<td>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.</td>
</tr>
<tr>
<td>1.9 Eligibility to practise as a medical specialist, within the meaning of the Staff Specialist (State) Award, has been verified.</td>
</tr>
<tr>
<td>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).</td>
</tr>
<tr>
<td>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.</td>
</tr>
<tr>
<td>1.12 Where verbal references were obtained, responses to the specified questions were recorded in writing.</td>
</tr>
<tr>
<td>1.13 Where written references were obtained, identity and relationship to appointee was directly confirmed, and written responses addressed the specified questions.</td>
</tr>
<tr>
<td>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.</td>
</tr>
<tr>
<td>1.15 All members of the selection panel had access to the entire written application, CV and supporting documentation for each applicant under consideration.</td>
</tr>
<tr>
<td>1.16 The selection panel included a medical practitioner from the speciality/sub-specialty in which privileges were sought.</td>
</tr>
<tr>
<td>1.17 The convenor of the selection panel has completed recruitment and selection training.</td>
</tr>
</tbody>
</table>

I confirm that the above occurred prior to the commencement at work of (name of appointee) ____________ to the position of ____________ in (name of NSW Health Organisation) ____________

Date of appointment: ____________

(Name) ____________________________ (Title) ____________________________

(Signature) ____________________________ (Date) ____________________________

Appendix 2.1 continued
### Staff Specialist and Clinical Academic Appointment Procedures

#### Critical Actions Compliance Declaration

<table>
<thead>
<tr>
<th>Task Description</th>
<th>✓</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2.</strong> Chair, Credentials (Clinical Privileges) Subcommittee must confirm the following:</td>
<td></td>
</tr>
<tr>
<td>2.1 The Credentials (Clinical Privileges) Subcommittee membership included a medical practitioner from the specialty or sub-specialty in which privileges were determined.</td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
</tr>
</tbody>
</table>

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) ____________________________

(Signature) __________________________________  (Date) ________________

<table>
<thead>
<tr>
<th>Task Description</th>
<th>✓</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>3.</strong> Chair, Medical and Dental Appointments Advisory Committee must confirm the following (required where appointment is for more than 6 months):</td>
<td></td>
</tr>
<tr>
<td>3.1 All members of MDAAC had access to the entire written application, CV and supporting documentation for each applicant under consideration.</td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
</tr>
<tr>
<td>3.3 Appropriate consideration has been given to any issues arising out of the check of the NSW Health Service Check Register.</td>
<td></td>
</tr>
<tr>
<td>3.4 Appropriate consideration has been given to any issues identified in any risk assessment report arising out of a National Criminal Record Check.</td>
<td></td>
</tr>
</tbody>
</table>

Name) ___________________________________    (Title) ____________________________

(Signature) __________________________________  (Date) ________________
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.
Rescinded

Recruitment and Selection of Staff to the NSW Health Service - Additional Standards for Security Staff (Pre-Employment Screening)

This module has been rescinded. Please refer to Module 1 of this policy directive for information about assessment methods.
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1 BACKGROUND

1.1 Purpose of Module Four

The purpose of this Module is to outline the specific additional, modified or differing requirements that exist when recruiting, selecting and appointing junior medical staff during the annual recruitment period. Module One remains the primary source of standards for all recruitment and selection actions.

The key dates for the annual recruitment of junior medical staff, as well as clinical year and term dates, will be released on the Ministry of Health website as Information Bulletins.

This document should be brought to the attention of all personnel involved in the recruitment of junior medical staff. In respect to vocational training positions, while the selection processes for each program may vary between different specialities, it is the employer’s responsibility to ensure that the selection process for positions is consistent with NSW Health recruitment and selection principles of merit, fairness, impartiality and transparency.

1.2 Relationship to other policies

As far as practicable all additional recruitment and selection related policy requirements for the annual recruitment of junior medical staff have been incorporated into this Module. However a small number of other key, subject specific policies will need to be considered alongside this Module, as identified below:

- Medical Officers - Employment Arrangements in the NSW Public Health System PD2010_074

1.3 Definitions

AEST: Australian Eastern Standard Time

Junior medical staff: consists of medical practitioners seeking positions in the annual recruitment period under the Public Hospital (Medical Officers) Award (with the exception of intern positions). It includes vocational training and non-vocational positions.

PGY: post-graduate year.

1.4 Prevocational trainees

Interns engaged as prevocational trainees under a two year contract within a prevocational network should not apply for a position in their second post graduate year as they are able to continue their employment in their second post graduate year within their existing networks.

If an intern wishes the opportunity to change networks in their second post graduate year, there are several limited options in which they may seek to do this. For further information please contact the Health Education and Training Institute (HETI). HETI has delegated authority from the Ministry of Health to recruit trainees to prevocational training networks in NSW, on behalf of NSW Health organisations. Further information is available at www.heti.nsw.gov.au.
1.5 Delegated Authorising Officer

Each Local Health District/Specialty Health Network will nominate a Delegated Authorising Officer (DAO) for the Junior Medical Officer Annual Recruitment Campaign. This person is responsible for:

- Approving positions for advertising and the subsequent appointments for those positions prior to preliminary offers being sent to applicants
- Communicating recruitment campaign information, such as Ministry of Health Policy Directives and Information Bulletins, to all relevant stakeholders within the Local Health District/Specialty Health Network
- Ensuring recruitment and selection polices and campaign business processes are being adhered to
- Liaising with Junior Medical Officer Unit and other medical recruitment personnel within the Local Health District/Specialty Health Network to ensure adequate resourcing for the recruitment campaign and appropriate staff within the Local Health District/Specialty Health Network attend eRecruit training.

2 RECRUITMENT AND SELECTION STANDARDS

2.1 Vacancy identified

Section 2.1 Module One outlines requirements for responding to identified vacancies.

2.2 Review position documentation

Section 2.2 Module One outlines requirements for reviewing position documentation.

2.3 Action prior to advertising

Section 2.3 Module One outlines requirements for action to be taken prior to advertising.

2.4 Employment without advertising

Some vocational training programs do not advertise positions in the annual NSW public health system online recruitment process, but instead the relevant medical college will separately recommend doctors who they deem are suitable to enter their training programs.

Where this occurs, the final decision to employ a doctor selected by a medical college into the college training program against a vacant position is at the discretion of the employer. A medical college, after selecting a doctor into a training program, must provide advice to the employer about the trainees selected into their program and may also provide recommendations on which training positions would meet the training requirements.

The college trainee will then be required to submit their details to the employer (ie curriculum vitae). The employer will determine the suitability of each trainee against the requirements of the position. This may be facilitated through interviews. Where the employer believes a trainee
is suitable for a position, satisfactory referee checks must be conducted (see Section 2.12). This must be done prior to the trainee receiving a letter of employment.

Where the employer has confirmed that two referee checks have already been undertaken by the specialty college and these checks comply with the requirements as outlined in Section 2.12, NSW Health organisations will not be required to undertake additional checks if they do not wish to do so.

In such circumstances, the NSW Health organisation must:

- Review the college referee reports to ensure compliance with the requirements outlined in Section 2.12 and to determine the suitability of the applicant for employment into the position. The Ministry of Health determines each year, which college referee reports comply with NSW Health standards, and publishes these each year; and
- Make direct contact with each referee to verify their identity and relationship to the applicant; and
- Keep copies of each referee report on the employee’s personnel file.

Where the college referee checks do not comply with NSW Health requirements and the above step have not been undertaken, they cannot be used in substitution for the NSW Health organisation undertaking their own referee checks.

All other relevant pre-employment checks (eg 100-point Identification Check, National Criminal Record Check and/or validation of a Working with Children Check clearance, confirmation of Medical Board registration and a Service Check Register check) must also be conducted before an applicant can commence employment.

### 2.5 Advertising requirements

All positions advertised during the annual recruitment period for junior medical staff are to be advertised through the centralised JMO eRecruit system. Local Health Districts must not independently advertise junior medical staff positions during the annual recruitment period outside of this process, with the exception of postgraduate fellows and clinical superintendents.

The contract length specified in advertisements, and position titles used, must be as advised by the Ministry of Health.

The NSW Ministry of Health will co-ordinate advertisements referring applicants to the eRecruit system during the campaign in state, national and international media.

Local Health Districts/Specialty Health Networks are to nominate coordinators who are responsible for managing the recruitment process for the annual recruitment of junior medical staff, which includes using the eRecruit system.

The eRecruit system will be accessible via a link on the NSW Ministry of Health website. Applicants must apply for positions using the eRecruit system ie online. Applicants will need a valid and up to date email address as preliminary offers will be made via email. A current contact telephone number is also required to arrange interview dates and times.

Junior medical staff recruited to vocational training positions are to be engaged for the minimum potential period for completion of the training program. If a trainee does not complete
the requisite training requirements within the time period of their existing contract of employment, they must reapply for employment.

Junior medical staff recruited outside the annual recruitment period to ad hoc vacancies can only be appointed up to the end of the current clinical year, and the vacancy readvertised for the following clinical year. However, if the appointment is to a specialty currently experiencing workforce shortages as determined by the Local Health District/Specialty Health Network, an appointment may be made for a period no greater than two years.

2.6 Position information package

*Section 2.6 Module One* outlines the requirements for information packages.

2.7 Approval to engage a recruitment consultant

*Section 2.7 of Module One* outlines the requirements for seeking approval to utilise recruitment consultants.

2.8 Application management

*Section 2.8 of Module One* outlines the standards for application management. In addition, written applications will only be accepted in exceptional circumstances (e.g., the applicant cannot access a computer/the Internet), and this will be determined on a case by case basis by the convenor. In such circumstances, the convenor will organise alternative means for the applicant to receive and supply information.

2.9 Selection process

The selection process leading to the employment of junior medical staff during the annual recruitment period will include establishing a selection panel. The role of the selection panel is outlined in *Section 2.9 of Module One*.

Where the selection panel is constituted as a state-wide centralised recruitment panel, it must also adhere to all aspects of this policy, including being properly composed as per *2.9.1 of Module One* and having the duties and role of the convenor fulfilled as per *2.9.2 of Module One*.

2.9.1 Selection panel composition

*Section 2.9.1 Module One* outlines the requirements for the selection panel composition. In addition to the requirement outlined in *Module One*:

The Delegated Authorising Officer (DAO) will approve the composition of each selection committee for positions within their organisation and ensure that selection committee membership is properly constituted. They are also responsible for approving the committee’s final recommendation, including resolving any minority reports.

For networked positions, one delegated decision maker will approve the recruitment action on behalf of all organisations involved in the network.
2.9.2 Role of the convenor

Section 2.9.2 Module One outlines the responsibilities of the convenor.

2.9.3 Role of the independent

Section 2.9.3 Module One outlines the standards for identifying independent members.

2.9.4 Conducting the cull

Section 2.9.4 Module One outlines the standards for culling applications.

In the Junior Medical Officer Annual Recruitment Campaign, further comparative culling can occur against selection criteria, workforce needs and training requirements.

2.9.5 Further assessment of applicants

Section 2.9.5 Module One provides standards for assessing applicants.

2.9.6 The interview process

Section 2.9.6 Module One outlines the requirements for the interview process. In addition to the requirements outlined in Module One:

The period when interviews can occur will be advised each year by Information Bulletin. This allows organisations within the NSW public health system the opportunity to interview comprehensively. It also provides applicants with the opportunity to attend interviews at multiple sites without having to make an immediate or final decision during this time.

Applicants must be given at least 3 days’ notice of the time of interview, however this notice period will be considered met if applicants are advised of the relevant interview times in the job advertisement, or if both the employer and applicant consent and agree to an earlier time.

No applicant is to be asked to accept a position at interview. Offers of employment can only be made once the delegate decision maker has approved the selection committee’s recommendation (see Section 2.17).

Recognising the time constraints that arise during the annual recruitment of junior medical staff, it may be difficult for all panel members to enter their decisions at the interview stage on the eRecruit system within the required timeframes; therefore the convenor may process these decisions on their behalf. However, in these circumstances, each panel member will be required to sign a record of the panel’s decision and this documentation must be uploaded into the eRecruit system.

2.9.7 Sight/collect mandatory documentation

Section 2.9.6.1 Module One outlines the requirements for the sighting and collection of mandatory documentation at interview.

2.10 Determine preferred applicants

Section 2.10 Module One outlines the process for determining the preferred applicants.
2.11 Verify information

Section 2.11 of Module One outlines the information that must be verified prior to any recommendation including a checklist of all mandatory actions required by the convenor. All the relevant information about an applicant's qualifications, experience and registration status and past performance must be appropriately and independently verified as per Appendix 1.5 of Module One. A selection committee member’s past knowledge of an applicant will not be sufficient to meet the standards reflected in Module One or this Module.

2.12 Conduct referee checks

Section 2.12 Module One outlines the requirements for reference checking. However, recognising the time and resource constraints that arise during the annual recruitment period, referee checks may be conducted before interviews and written references will be accepted.

During the bulk annual recruitment of junior medical staff the referee report attached at Appendix 4.1 in this Module can be used in substitution for requesting separate individual referee reports for each position an applicant may have applied for.

This referee report contains a generic set of questions, therefore there is no need for a nominated referee to complete more than one referee check per applicant.

The e-Recruit system will:

- Recognise when a referee report has been requested of the referee
- Recognise when the referee has returned the report
- Make the information available (including being able to review the report) to all panels where the applicant has been invited to interview
- Only allow progression to preliminary offer if referee reports are verified as per NSW Health policy.

The panel must still explore any particular issues arising from the interview with the referee after interview, including any specific questions relating directly to the selection criteria.

Each applicant will still require two referee checks to be undertaken to be considered for a position. Where these are written referee reports, verbal contact must still be made with the referee and their identity and relationship to the applicant confirmed. The system will recognise when a referee report has been verified, so the report need not be verified with the referee multiple times.

2.13 Assessing information

Section 2.13 Module One provides standards for assessing information and conducting risk assessments where necessary.
2.14 Make recommendations

Section 2.14 Module One outlines the process for making recommendations, including eligibility lists, Australian citizenship/residency considerations and alternative and minority reports.

2.15 Preference matching – annual recruitment campaign

Section 2.15 Module One outlines the rules around when preference matching can be undertaken. In addition:

Preference matching can occur when there are multiple positions available eg across various facilities within the NSW public health system, and as a consequence, applicants are asked to preference the facilities where they wish to work by ranking their most desirable facility first, their second most desirable facility second, and so forth.

As a consequence of preference matching, successful applicants will only receive one offer of employment in the first round of offers. Subsequent offers will only be sent if positions are not filled in the first round of offers and an applicant is on the facility’s eligibility list. Therefore to be considered for a network or facility an applicant must apply and preference all networks/facilities for which they want to be considered.

The selection panel, after interviewing all of the applicants for the positions, will also rank the successful applicants. After both rankings have been completed (the applicant’s and that of the panel), preference matching occurs and candidates are matched against a facility.

The preferences of both the applicant and selection panel are to be kept confidential during the recruitment process.

Applicant preferences refer to a preference of employment location and therefore cannot be used to cull an applicant, as they do not reflect on an applicant’s ability to undertake the requirements of the position. Therefore preferences must not be made available to selection panel members until after the merit selection process has been completed and they have ranked the applicants ready for the preference matching process to be undertaken.

As preference matching is only run on successful applicants who have been recommended against available positions, referee checks must be conducted prior to preference matching.

2.16 Approval to appoint

The delegated decision maker will be required to approve the recommended applicant(s) and any eligibility lists prior to email offers being made.

Prior to approving the recommendation, the delegated decision maker must be satisfied that all necessary selection checks have taken place.

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

No verbal offers are to be made to candidates.

As a consequence, offers for all positions during the annual recruitment of junior medical staff must occur electronically and will be sent automatically from the eRecruit system, with the exception of those circumstances outlined in Section 2.8 of this Module.

2.17.1 Email offers

Electronic emails must be sent to all applicants informing them of the outcome of their interview. These will be in one of the following formats:

- An email informing the applicant of a preliminary offer of a position.
- An email informing the applicant that they have been placed on an eligibility list. These emails will be sent following the initial rounds of offers and once all positions have been filled.
- An email informing the applicant they have not been successful once all offers have been made and all positions filled.

Preliminary email offers cannot be sent until all applicants for the position(s) have been interviewed and the selection committee has agreed on those applicants for whom positions are to be offered and, if applicable, those applicants who will be placed on the eligibility list.

Preliminary emails will be issued once the delegated decision maker has given approval for an offer to be made.

A set email text is built into the eRecruit system. The preliminary email offer includes a clear statement that the offer is conditional upon successful completion of all pre-employment checks, including the Service Check Register check, and obtaining registration with the Medical Board of Australia. When this offer is accepted, this forms part of the employment contract.

An applicant has 48 hours from the time and date of the email offer to accept or reject a position. If the applicant wishes to discuss the option of delaying their decision, they must contact the convenor. However, failure on the applicant’s behalf to accept/decline the position within the timeframe, or obtain approval to delay their decision, may result in the job offer being withdrawn.

If the applicant does not respond to the email by the end of the 48 hour period, the convenor must make all reasonable attempts to contact the applicant to obtain a response before withdrawing the offer and offering the position to the next person on the eligibility list.

Reasonable attempts to contact the applicant include contacting the applicant on the contact numbers and email provided by the applicant. Once all reasonable attempts have been made and documented, the convenor is to send an email advising the applicant that no response has been received and that if a response has not been received within a new specified timeframe, the offer will be considered withdrawn.

Applicants are not to be pressured to accept or reject an offer prior to the date specified, and therefore must not be approached during this period other than through the preliminary email offer.
Offers once made cannot be withdrawn except in circumstances where no response has been received from the applicant and reasonable attempts to contact the applicant have been made, or where adverse pre-employment or Service Check Register checks are returned, credentials cannot be verified, Medical Board of Australia registration cannot be obtained, registration conditions have been placed on the applicant’s registration that the applicant did not previously identify and which the facility cannot accommodate, or the applicant does not comply with requirements for protection against the specified infectious diseases.

Applicants may only accept one offer of employment. If an applicant receives more than one offer and wishes to discuss or clarify an offer to aid decision making, the applicant may initiate verbal discussions with the convenor.

2.17.2 Employment documentation

Written letters of employment to any position must be issued in accordance with the annual recruitment dates.

Standard letters have been developed for the employment of staff to the NSW Health Service including junior medical staff and are built into the eRecruit system, including separate letters for vocational training positions, non-vocational training positions and networked positions. These standard letters must be used and are in accordance with the requirement outlined at Appendix 1.8 of Module one.

Contract length, and position titles used, must be as advised by the Ministry of Health.

While letters of employment may be issued prior to all pre-employment checks being conducted, the standard letters are clear that such employment is subject to satisfactory clearances of these checks. This does not include referee checks as these are to be conducted prior to an offer of employment. As a consequence under no circumstances is a junior medical staff appointee to commence employment until all pre-employment checks have been undertaken (e.g. registration with the Medical Board of Australia, Working with Children Check and the Service Check Register check).

The information included in the employment documentation will allow the applicant to make an informed decision, and allow the NSW Health organisation to subsequently manage the successful applicant in accordance with the relevant award, legislative and policy provisions. The successful applicant must be asked to accept the offer and the related conditions in writing.

Completed letters of employment must be returned within the time period outlined in the letter, or an offer may be withdrawn. A reasonable attempt to contact the applicant, to determine why the completed letter of employment has not been returned must be made prior to the offer being withdrawn.

Under no circumstances is a Junior Medical Officer to commence employment prior to completing employment documentation. Acceptance of the terms of employment is to be evidenced by signing the acceptance of offer of employment form.

The successful applicant must not make any alterations to the letter of employment. Any purported amendments or variations to a signed letter of employment will not be accepted and are of no effect.
2.17.3 Where an offer is declined

Section 2.17.2 Module One outlines the steps to take where an offer is declined. In addition, applicants who have already accepted a position but who are subsequently offered another position which they wish to accept, are to notify the employer of the original position as soon as practicable to inform them they will be accepting another position and that they therefore are withdrawing for that position.

2.18 Meeting visa requirements

Section 2.14.3 and 2.18 Module One outlines information relevant to meeting visa requirements.

2.19 Advise unsuccessful applicants

Section 2.19 Module One outlines standards for advising unsuccessful applicants.

2.20 Post-selection feedback

Section 2.20 of Module One outlines standards for post selection feedback.

2.21 Documentation and retention of records

Section 2.21 Module One outlines the standards for retention of records relating to the recruitment and selection process.

2.22 Complaints managements

Section 2.22 Module One outlines information relevant to reviewing recruitment and selection decisions.

2.23 Commencing work

Section 2.23 Module One outlines the standards relating to commencing work.
Appendix 4.1

Referee Report

- This referee report will be used for all positions the applicant has applied for during the annual Junior Medical Officer recruitment campaign. However, a convenor may also seek further clarification from a referee on information provided in the referee report or raised during the interview phase.
- If this referee report has been completed online or in writing you will be contacted by a medical administration representative to verify the referee report was completed by you.
- Please complete the questions below. In providing your responses you may wish to consult with others that have worked with the applicant and have direct knowledge of their skills, performance and competencies.
- By completing this referee report you are confirming that you are providing an honest, accurate and completed response to each question.
- The information you provide may form part of the selection committee report, which may be used in providing feedback to the applicant.

NAME OF APPLICANT: ________________________________________________________

Referee name: ________________________________________________________________

Position title and organisation: __________________________________________________

Email address: _______________________________________________________________

Contact number: _______________________________________________________________

Relationship to the applicant: ___________________________________________________

Were you his/her supervisor?
If so for what period of time? ____________________________________________________

Length of time you have known the applicant
/ Dates you have worked with applicant: __________________________________________

1. How would you describe the applicant’s skills/experience/competence (as appropriate) in the workplace in relation to the question outlined the below?

- Clinical Decision Making
  a. How would you assess the applicant's ability to apply their clinical knowledge and concepts to clinical situations?
     □ Poor
     □ Satisfactory
     □ Good
     □ Excellent
     □ Not able to comment

     Further comments (if any): ___________________________________________________
                             ___________________________________________________

  b. How would you assess the applicant’s clinical judgement, skills and ability to perform appropriate clinical assessments?
Organisation and planning

c. How would you assess the applicant’s willingness to participate in quality improvement activities that contribute to improving patient care?

Further comments (if any):

d. How would you assess the applicant’s ability to manage their time and competing priorities?

Further comments (if any):

Collaboration

e. How would you assess the applicant’s ability to maintain positive relationships within the workplace?

Further comments (if any):

f. How would you assess the applicant’s ability to prevent, negotiate and resolve conflict between peers and other disciplines?

Poor
Rescinded
j. How would you assess the applicant’s punctuality and attendance in the workplace?

- Poor
- Satisfactory
- Good
- Excellent
- Not able to comment

Further comments (if any):

Communication

k. How would you assess the applicant’s ability to build a rapport and convey relevant information and explanations to patients and their families?

- Poor
- Satisfactory
- Good
- Excellent
- Not able to comment

Further comments (if any):

I. How would you assess the applicant’s ability to convey clear and timely written and verbal information to colleagues and maintain adequate record documentation?

- Poor
- Satisfactory
- Good
- Excellent
- Not able to comment

Further comments (if any):

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. Is there anything else you think would be relevant for us to consider?


Recruiment and Selection of Staff to the NSW Health Service – Additional Standards for Junior Medical Officer Annual Recruitment Campaign

MODULE 4
Appendix 4.2

Governance arrangements for statewide centralised recruitment and centralised panels

Each year the recruitment of Junior Medical Officers into vocational and non-vocational positions for the following clinical year occurs as an annual recruitment process utilising the Junior Medical Officer eRecruit system. To improve efficiencies for specialties that recruited small numbers of trainees per facility, and reduce the burden on trainees of having to apply for multiple positions at multiple facilities, the use of statewide centralised recruitment panels commenced in 2007.

4.2.1 Definitions

Statewide centralised recruitment is a business process within Junior Medical Officer recruitment, whereby participating specialties recruit to vacancies across the state using one advertisement within the Junior Medical Officer eRecruit system, as well as a centralised interview process. In this way, the selection panel is able to consider an interviewee for multiple roles in that specialty across the state. A specialty which uses a centralised interview process but only considers applicants for appointment within a limited area, for example within a Local Health District/Specialty Health Network or not all of state, is not considered to be a specialty taking part in statewide centralised recruitment. However, a specialty as a whole may agree that rural facilities may recruit outside this process due to their location.

Statewide centralised recruitment panel refers to a selection panel for a specialty which is conducting statewide centralised recruitment. This panel must be constituted and comply with the roles and responsibilities as outlined in Section 2.9.1 of Module One.

Convenor in a statewide centralised recruitment panel has primary duties which are the same as those outlined in Section 2.9.2 of Module One. The additional responsibilities specific to statewide centralised recruitment panels are outlined in the Junior Medical Officer recruitment business process document released each year by HealthShare NSW. The convenor, or any college/association which may be involved in nominating a convenor, may not recoup from the Ministry of Health any costs associated with conducting statewide centralised recruitment.

The convenor for a statewide centralised recruitment panel may be the same as the year before, however it is recommended the convenor is not the same person more than three years running. The nominated associate convenor should be considered a successor to the convenor.

Associate Convenor assists the convenor and is able to undertake the role of the convenor should the convenor become unavailable.

Junior Medical Officer (JMO) host unit refers to the Junior Medical Officer unit, however named, which manages and hosts a statewide centralised recruitment panel. The host unit may or may not be located in the same facility as the convenor.

4.2.2 Governance arrangements

An authorised representative/s, such as persons nominated by the executive committee or equivalent of the specialty, will liaise with the Ministry of Health to establish a centralised recruitment process, if the specialty is eligible and prepared for statewide centralised recruitment. If approved, the Ministry of Health will advise stakeholders through the Junior Medical Officer recruitment committee and by other means of the specialty, sub-specialty (if applicable), position type, contract length for letters of appointment, contact information for the Junior Medical Officer host unit, convenor and associate convenor.

The nominated Junior Medical Officer host units are reviewed each year by the Junior Medical Officer
Recruitment committee. Local Health Districts/Specialty Networks which benefit from statewide centralised recruitment are eligible to have facilities nominated to act as a Junior Medical Officer host unit for one of the specialties. The Ministry of Health will receive recommendations from the Junior Medical Officer recruitment committee as to Junior Medical Officer host units.

Where possible, the same facility will act as Junior Medical Officer host unit for the same statewide centralised recruitment panel for a minimum of three years to benefit from the improved efficiencies which develop from prior experience. The Ministry of Health will notify the Chief Executive of the Local Health District/Specialty Network as well as the facility that they have been nominated.

If the Local Health District/Specialty Network does not accept the nomination to host a statewide centralised recruitment panel at the nominated facility, the Local Health District/Specialty Health Network Chief Executive (or delegate) will nominate where else within their Local Health District/Specialty Health Network the Junior Medical Officer host unit may be located.

Where a specialty agrees to participate in a centralised panel, they are required to remain in that process for that recruitment/action/year and abide by the decision of the panel and outcome of the process.

The roles and responsibilities of all stakeholders in the statewide centralised recruitment process will be published annually in the HealthShare Business Process document for the JMO recruitment campaign.

Preliminary offers for centralised recruitment panels follow the same requirements as outlined in Section 2.17.2 of Module One. In the case of a statewide centralised panel each successful applicant is allocated to a facility. However in the situation that an applicant declines an offer the facility will utilise the eligibility list. If the facility is unable to fill the vacancy using the eligibility list, the position will be readvertised.

If a statewide centralised recruitment panel is unable to fill all vacancies then the position is readvertised and the same interview panel is to be reconvened to undertake the recruitment process. It may be acceptable to have a smaller interview panel if all members of the original panel are not able to attend and agree to a smaller panel. The requirements for interview panels as stated in Section 2.9 of Module One must still be met.
Appendix 4.3

Allocation process for NSW Health Trainees not in networked positions
to enable letters of employment for the minimum potential period
of their training program to be offered

In 2007, the introduction of Policy Directive *Medical Officers – Employment Arrangements in the NSW Public Health System* enabled trainees to be engaged under one employment contract for the minimum period of their training program.

Some specialty training programs which do not have formal networks with predetermined training places were not utilising this option, but undertook an annual recruitment process to facilitate the allocation of trainees to their next training position.

An allocation process now replaces the annual recruitment process for those specialities that do not have a formalised network arrangement to determine placements for 2nd/3rd/4th year trainees.

The allocation process will increase efficiency by reducing the administration burden on clinicians, administration and the trainees themselves, as it will not be as resource intensive as a full recruitment process.

4.3.1 Governance arrangements

Authorised representatives, such as persons nominated by the executive committee or equivalent of the specialty will liaise with the Ministry of Health to determine if their specialty is eligible and prepared for an allocation process.

If approved, the Ministry of Health will advise stakeholders through the Junior Medical Officer recruitment committee and by other means.