



HP3 PERSONAL UPGRADE SCHEME FOR THE RECOGNITION OF EXCELLENCE

GUIDELINES
FOR APPLICANTS,
SUPERVISORS, REFEREES
AND ASSESSORS

2021 EDITION

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These Guidelines, information session presentation slides, the online Application form, and the Scheme Secretariat contact details are available at the ACT Health website:

<https://health.act.gov.au/careers/allied-health/learning-and-professional-development/health-professional-level-3-personal>

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PREFACE: What do these Guidelines cover?

These Guidelines are intended for ACT Public Sector employees and Calvary Public Hospital Bruce employees who are applying for, signing off on and/or completing a referee report in relation to an application to the HP3 Personal Upgrade Scheme for the Recognition of Excellence.

The Guidelines explain how the Scheme works, who is eligible, how to apply and how an application will be considered.

Applicants, Supervisors and Referees are strongly encouraged to read these guidelines prior to commencing an application, signing off an application or completing a referee report.

PART 1: INTRODUCTION

1.1 HP3 Personal Upgrade Scheme

- 1.1.1 The HP3 Personal Upgrade Scheme for the Recognition of Excellence ('the Scheme') is conducted annually and is available for application during a specified application period. The Scheme recognises and rewards eligible ACT Public Sector (ACTPS) and Calvary Public Hospital Bruce (CPHB) HP3.3 employees who perform 'over and above' the standard expectation of their role. A Personal Upgrade is awarded to applicants who demonstrate a level of quality and excellence that reflects exceptional personal contribution to their employer and professional discipline. Eligible ACTPS Directorates are Canberra Health Services (CHS), Community Services (CSD), Education (ED), ACT Health Directorate (ACTHD) and Justice and Community Safety (JACS).
- 1.1.2 To be considered for a Personal Upgrade, applicants must demonstrate achievements in developing and delivering high quality patient/client/consumer care, and commitment to the continuous improvement of their employer and profession.
- 1.1.3 The Scheme is overseen by ACT Health Directorate and administered by a Secretariat in each of the eligible ACTPS Directorates and CPHB organisations.
- 1.1.4 The Upgrade is transferable between eligible agencies and if you have previously been awarded a Personal Upgrade you do not need to re-apply.
- 1.1.5 Successful applicants are advanced to the HP3.5 level, backdated to the date of the outcome decision by the Scheme Panel Chair.

1.2 How does the Scheme work?

- 1.2.1 All applicants must apply using the online application form.
- 1.2.2 The application form requires applicants to address **two assessment criteria**, one focused on achievements at an organisational level, and the second on the applicant's specific allied health profession.
- 1.2.3 Applicants must demonstrate through responses to both assessment criteria, performance that **exceeds** the standards expected of their HP3 position, with reference to their current HP3 duty statement.
- 1.2.4 An application must include the
- applicant details
 - applicant's written responses to both criteria,
 - supervisor statement,
 - two referee reports;
 - additional supporting documentation can be provided up to a maximum of 20 single-sided A4 pages per criterion; and
 - payroll letter and an accurate HP3 Duty Statement

1.3 What does the Scheme reward?

- 1.3.1 The Scheme rewards excellence in individuals who demonstrate evidence of achievements over and above the standard expected of their Health Professional Level 3.3 position.

1.3.2 In determining whether an applicant demonstrates excellence over and above the standard expected of their Health Professional Level 3.3 position, the Core Assessment Panel is looking for evidence of the following:

- The extent to which the applicant has personally contributed to and/or led key initiatives that are recognised as having enhanced the efficiency and effectiveness of their organisation, beyond the expectations of their position as outlined in their Duty Statement; and
- The extent to which the applicant demonstrates generalist and/or specialist knowledge, experience and skills in their allied health profession that is formally recognised by peers and other professionals at a level of excellence that exceeds the expectations of their position.

1.3.3 Further, a Panel evaluates the extent to which the applicant provides evidence of many of the following characteristics through their written application, referee reports and relevant supporting documentation.

- Demonstrating sustained commitment to improving patient care and wellbeing or improving public health.
- Demonstrating sustained high standards of both technical and clinical aspects of service whilst providing patient focused care.
- Providing outstanding contribution to professional leadership.
- In their day-to-day practice, demonstrating sustained commitment to the values and goals of their employing agency.
- Through active participation in clinical governance, contributing to continuous improvement in service organisation and delivery.
- Implementing the principles of evidence-based practice to improve efficiency and effectiveness of care and/or patient outcomes.
- Contributing to knowledge base through research and participating actively in research governance.
- Being recognised by peers as excellent teachers and/or trainers and/or managers.
- Contributing significantly to policy making and planning in health and healthcare.

1.3.4 Each application is assessed on its own merits and there are no rankings or quotas.

1.4 How are applications assessed?

1.4.1 Applications are assessed by an agency specific Core Assessment Panel (Panel), comprising one to two senior health professionals, a Human Resources representative, and a Scheme Secretariat (non-voting). In addition, a senior health professional will assess application(s) from applicants of that discipline (the 'discipline-specific assessor').

1.4.2 A standard assessment rubric is used to assess and recommend applicants for the Upgrade, regardless of discipline or agency (see Appendix 1 and 2).

- 1.4.3 The Scheme Secretariat for each Panel compiles a written summary of the Panel’s findings for each applicant. This summary is used to provide individual feedback to unsuccessful applicants following the outcome of the process.
- 1.4.5 Completion of the assessment process from the closing date to final decision and notification of applicants may take up to three months.
- 1.4.6 The assessment process is summarised at Figure 1 below.

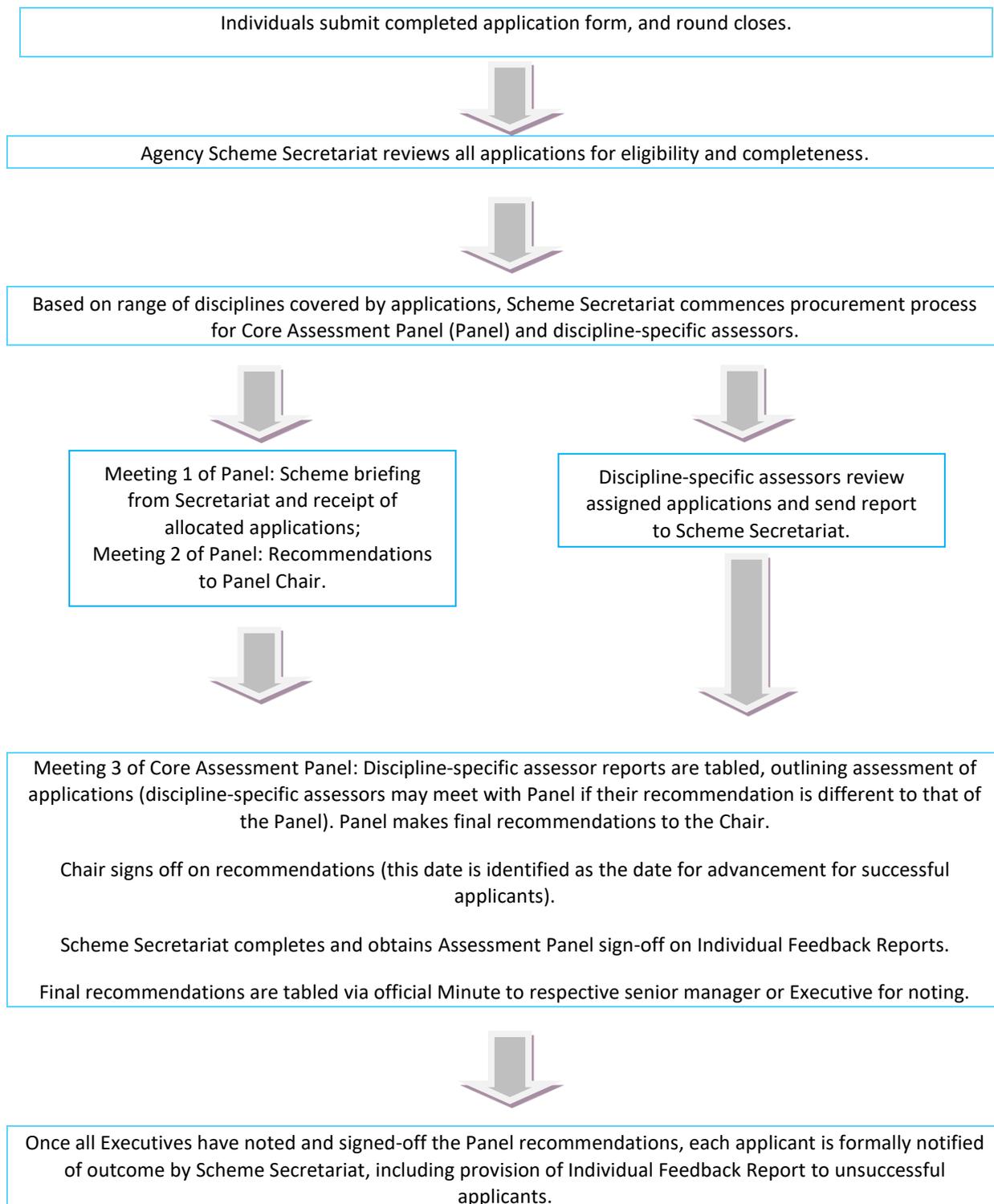


Figure 1: Summary of assessment process

PART 2: ELIGIBILITY

2.1 Who can apply to the HP3 Personal Upgrade Scheme?

2.1.1 To be eligible to apply to the HP3 Personal Upgrade Scheme an applicant must:

- Have been continuously employed (temporary, permanent or combination) by an eligible ACTPS Directorate and/or Calvary Public Hospital Bruce (or combination) for a **minimum of 12 months at the Scheme closing date;**
and
- Be employed at the Health Professional Level 3 classification, Pay Point 3 (HP3.3) at the closing date; **and**
- Not be subject to a current underperformance or misconduct process.

2.1.2 If at the time of application an applicant works for two or more eligible agencies at HP3.3 (for example works in two part-time positions in different agencies), a single application only is required via one of the eligible agencies. Applicants in this situation are required to identify both agencies in their Application.

2.1.3 The Personal Upgrade is transferable between agencies while ever the applicant is employed in an HP3 position, and applicants do not need to re-apply each year.

2.2 Part-time employees

2.2.1 Part-time employees are eligible to apply to the Scheme. If a part-time employee is successful they will be remunerated on a pro-rata basis.

2.4 Staff on higher duties

2.4.1 Staff who are acting on higher duties at HP3.3 are eligible to apply, provided they meet all eligibility outlined at 2.1.1.

2.4.2 If a staff member acting on higher duties is successful in their application the Upgrade will apply for as long as, and whenever in the future, they are employed at HP3.3. The Upgrade does not transfer with the applicant on return to a substantive position lower than HP3 level.

2.5 Repeat applicants

2.5.1 An unsuccessful application in one year does not prevent an applicant from re-applying in the following year(s), provided they meet eligibility criteria.

2.5.2 Applicants who re-apply are expected to review the feedback report provided by the Panel at the time of their unsuccessful application and to prepare a new application taking the feedback into account.

PART 3: APPLICATION PROCESS

3.1 Pre-application planning and Scheme familiarisation

- 3.1.1 Any individual who believes they are eligible to apply should discuss their proposed application with their line manager, profession lead, professional supervisor and/or other relevant senior manager.
- 3.1.2 Applicants are encouraged to attend an *HP3 Personal Upgrade Scheme for the Recognition of Excellence Information Session* or view a recording. Information sessions will run in the month prior to the Scheme opening.
- 3.1.3 Applicants are also encouraged to familiarise themselves with these Guidelines including application form, assessment rubric, and referee report templates. Agency Scheme Secretariats are available to answer any questions potential applicants might have.

3.2 Working to scope versus performing above expectations

- 3.2.1 Applicants are required to carefully review their HP3 Duty Statement prior to commencing an application and must ensure, in collaboration with their line manager or supervisor, that the Duty Statement they submit with their application both accurately reflects the range of duties and current expectations of their HP3 position.
- 3.2.2 A Duty Statement that does not accurately reflect duties undertaken is not the basis for an applicant to claim that they are exceeding the expectations of their position, and potential applicants should discuss this with their manager. Similarly, longevity in a position, years of accumulated experience and/or position title are not, on their own, indicators of excellence.
- 3.2.3 Applicants are required to assess their performance against the expectations of their Duty Statement and to ensure that they do not submit claims that are 'business as usual' or routine expectations of the position. Working to scope is expected of all staff and a successful application to the HP3 Personal Upgrade Scheme requires not only that an applicant is working fully to the expectations of their position but that they are performing at a level above the standard expectations.
- 3.2.4 To demonstrate that an applicant has exceeded the routine expectations of their position requires a high bar being set in terms of the types of claims made as well as the provision of relevant, robust, and reliable evidence ([refer 4.5-What is Evidence?](#)).
- 3.2.5 In summary, successful applicants are:
 - Highly regarded within their organisation and seen as current and future leaders in their field;
 - Excellent role models for their profession and display leadership which significantly contributes to excellence in their health profession; and
 - Able to present an application in which their claims can be clearly singled out or distinguished from the work of other people.

3.3 Supporting an application

Supervisors

- 3.3.1 The HP3 Personal Upgrade assessment process is not a substitute for workplace performance management and supervisors should assist eligible applicants by:

- Familiarising themselves with the Guidelines and application process.
- Reviewing the applicant's Duty Statement and where required updating it prior to an application being commenced.
- Having a critical conversation with the applicant about their proposed application and claims. Discussion should take place well in advance of the closing date and careful consideration should be given to discussing whether an application submitted in subsequent years may be more appropriate.
- Assessing the proposed application critically and being transparent about their willingness, or otherwise, to support the application, either as the sign-off supervisor and/or as a referee. Proactively utilising routine performance management systems to flag a potential application to the Scheme, including identification and support of training, professional development, quality improvement and research opportunities that might help the applicant to work towards a successful application.
- Discussing the Individual Feedback report provided by the Assessment Panel following an unsuccessful application and working with the employee to identify opportunities for a strengthened future application.

Referees

- 3.3.2 An applicant is required to obtain sign-off on their claims by their immediate supervisor, as well as provide **two referee reports** in support of their application- one for each Criterion. Referee reports must be provided by two different people. One referee report can be provided by the immediate supervisor.
- 3.3.3 Referees must be at HP3 level or above.
- 3.3.4 Applicants are strongly encouraged to give serious consideration to who they ask to be their referees and should ensure they discuss their proposed application and claims with the referees from the outset, rather than involving them at the end of the process.
- 3.3.5 If a potential referee is of the view that they cannot support the application, either because they believe the claims are not robust enough and/or that the applicant might be better placed to submit their application in a subsequent year they should immediately provide this feedback to the applicant.
- 3.3.6 The referee must read the completed Criterion response and evidence; and respond specifically to the claims made.
- 3.3.7 The use of emotive language and/or limited detail undermine the credibility of the referee report and can raise doubt as to whether the referee supports the application.
- 3.3.8 The referee report must be submitted online by the referee and be received by the closing date.

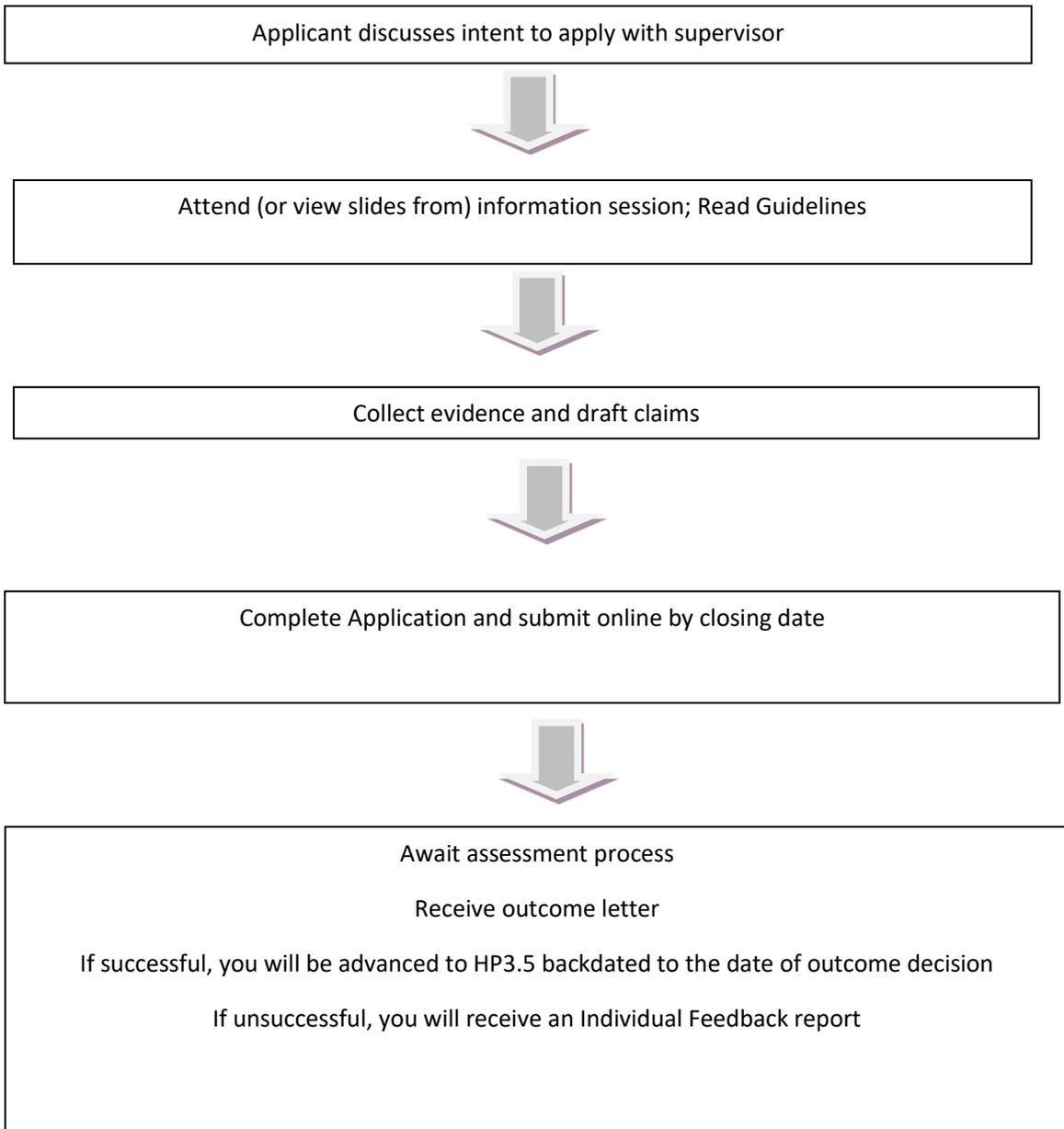


Figure 2: Summary of application process

PART 4: ASSESSMENT CRITERIA

4.1 What is excellence?

- 4.1.1 An applicant must be able to demonstrate excellence through their responses to both assessment criteria, ensuring that their performance:
- Represents an outstanding contribution to the organisation and their health profession; and
 - Goes beyond what is standard practice within the profession and/or position; and
 - Reflects achievements, backed by evidence, that are robust, relevant, and reliable, are directly attributable to the applicant and whose contribution can be clearly singled out or distinguished from the work of other people.
- 4.1.2 Excellence can be demonstrated via
- delivering high quality services; or
 - improving the efficiency and/or effectiveness of services; or
 - professional expertise whilst simultaneously improving quality.
- 4.1.3 Applicants should indicate start and finish dates in relation to claims made about their achievements.
- 4.1.4 All claims should concentrate on achievements within the last five years.
- 4.1.5 Holding a HP3 position and/or longevity in the position does not in itself justify a HP3 Personal Upgrade.

4.2 Overview of assessment criteria

There are **two assessment criteria** the applicant must address. Both must be assessed as meeting the benchmark for excellence to be determined successful. The assessment criteria have been deliberately written to encompass the wide variety of allied health professions, work settings and HP3 roles across all eligible ACTPS Directorates and Calvary Public Hospital Bruce.

4.3 Criterion One-Organisational Criterion

4.3.1 Criterion One requires applicants to demonstrate how their performance and achievements have enhanced the efficiency and effectiveness of their organisation above the expected level. Applicants are required to select one of the five listed options and to tailor their response to that option. Word limit: 1000 words.

Criterion One

Select one of the following five areas and demonstrate how you have enhanced the efficiency and/or effectiveness of your organisation above the expected level:	
Select one only	Overview of the category
1. Delivering High Quality Customer Service	Evidence of leadership demonstrated by the applicant through being personally involved in leading and/or setting directions, creating a customer focus, and demonstrating clear and visible values and high expectations. Evidence should show achievements in delivering a service(s) which is safe, has measurably effective clinical or client outcomes, provides valuable patient or client experience, as well as evidence that opportunities for improvement are consistently sought and implemented.
2. Leadership	Evidence of leadership, innovation and originality demonstrated by the applicant through leading a profession-specific or team-specific project(s) that: <ul style="list-style-type: none"> improves the efficiency and effectiveness of the applicant’s service, organisation or profession; promotes a culture of improvement and innovation.
3. Strengthening Communities	Evidence of outstanding achievements demonstrating how the applicant has developed and sustained strategic partnerships to enhance efficiency and effectiveness, promoted collaborative practice and resulted in positive outcomes for the relevant community they work with.
4. Improving Performance and Accountability	Evidence demonstrates how the applicant has personally led the introduction, development, implementation and evaluation of an idea, method, technology, process, or application, resulting in enhanced performance and accountability.
5. Enhancing the Patient/Client/Service User Experience	Evidence of demonstrated initiative or program led by the applicant resulting in outstanding achievement by promoting access, engagement, and ongoing participation in services.

Figure 3 - Overview of Criterion One

4.4 Criterion Two-Health profession specific

- 4.4.1 Criterion Two requires applicants to demonstrate how they reflect excellence through their health profession, either as a practitioner with specialist knowledge, skills, and experience and/or generalist knowledge, skills, and experience and how this expertise is recognised through a consultant role utilised by peers and other professionals. Word limit: 1000 words.
- 4.4.2 An applicant can address this criterion from both perspectives, i.e. specialist and generalist knowledge, skills and experience, or focus on just one, however the applicant must state which perspective they are addressing the criterion from.

Extensive specialist and/or generalist knowledge, skills, and experience within your health profession, recognised through a consultant role utilised by peers and other professionals.

Note: The applicant is required to state whether they are addressing this criterion from a generalist or specialist perspective - both can be claimed however claims must be clearly identified as either generalist or specialist.

Criterion element	Overview of the category
Extensive <u>generalist</u> knowledge, skills, and experience	<p>Evidence that the applicant demonstrates general competencies related to evidence-based practice, policy, leadership, quality improvement, research, teamwork, and collaboration, enabling them to:</p> <ul style="list-style-type: none"> • provide appropriate interventions to a wide variety of individual clients, families, and communities; • competently engage in all levels of interventions; • integrate advanced knowledge, theories, skills, values, and ethics through demonstrated commitment to research and evaluation.
Extensive <u>specialist</u> knowledge, skills, and experience	<p>Evidence that the applicant has specialist knowledge, skills, attributes & abilities within a defined scope of clinical practice.</p> <p>Recognised by peers and other professionals for this expertise, which may be demonstrated through formal qualifications including postgraduate qualifications, professional association accreditation, National Board endorsement, university teaching or assessor appointment, research, peer reviewed publications and/or other formal teaching and training activities.</p> <p>Formally recognised as a resource for others and influences professional practice.</p>

Figure 4- Overview of Criterion Two

4.5 Evidence: meeting the benchmark

- 4.5.1 An applicant must be able to demonstrate through their responses to both assessment criteria that their performance:
- Represents an outstanding contribution to the organisation and their health profession.
 - Goes beyond what is standard/routine practice within the profession or routine expectations of an applicant's position.
 - Contains achievements and is supported by documents that are robust, relevant and reliable and are directly attributable to the applicant, whose contribution can be clearly singled out or distinguished from the work of other people.
- 4.5.2 Applicants should be reassured that the Panel does not rely exclusively on formal research as evidence of excellence. Equal value is placed on the following:
- Professional knowledge, skills and expertise built up over several years, provided that the applicant demonstrates that this knowledge is at a level over and above that expected of their position and that it is recognised and utilised by peers and other professionals in a consultancy capacity.
 - Evidence of completion of relevant further study.
 - Quality Improvement or other formal projects, which include quantified or qualitative outcome data, leading to enhanced organisational and/or service efficiency and effectiveness.

Reliable evidence

- 4.5.3 Claims by an applicant and their referee must be based on facts. Where a false statement is made and/or information provided by an applicant is found to be in breach of organisational policy, the Panel will take appropriate action which might include referring the matter to an appropriate body.

Relevant evidence

- 4.5.4 Applicants should consider the number of claims against each criterion. A sheer volume of claims does not necessarily build a case for excellence. Claims must be supported by relevant evidence.
- 4.5.5 **You must give dates for activities.**
Applicants are required to specify achievements by date and should focus on activities/claims from within the last five years.
- 4.5.6 **You must focus claims on your current HP3 position.**
Applicants are required to address the assessment criteria through claims and achievements that relate specifically to their current HP3 position. Periods of higher duties are not relevant to an application and higher duties on their own are not evidence of excellence.
- 4.5.7 **You must focus claims on your current organisation**
Applicants are required to address the assessment criteria through claims that relate primarily to their current employing organisation(s). Applicants should consider whether an application in a subsequent year might be more appropriate in terms of developing the timeframe over which they can focus their claims and achievements.

Work undertaken in other States, Territories or overseas is not directly relevant to the Scheme, and on its own is not evidence of excellence, however if an applicant can demonstrate that this experience has had a direct benefit to their Agency or profession then that impact can be considered.

Robust evidence

- 4.5.8 Robustness of evidence can enhance the Panel's confidence in an applicant's claim(s) especially where the evidence demonstrates high level scientific evidence, qualitative and/or quantitative, and/or where supporting documents back-up the specific claims (for example a strong referee report).

4.6 Types of evidence

The strength or robustness of a claim is linked to the quality of the evidence, and the following pages provide examples for guidance.

Quality improvement projects

- 4.6.1 Evidence of an applicant's personal leadership or significant contribution to a quality improvement, research or project initiative, noting that it is an expectation that you provide evidence that you have participated in the full QI cycle.

Claims related to Quality Improvement should include evidence of:

- Developing actions or activities related to the project - including identification of gaps, what/why improvements were needed;
- Developing and completing relevant audits or applying strategies to implement evidence-based practice, leading to demonstrable service improvements - it is a baseline expectation that you provide evidence that you have fully participated in these processes;
- Project or QI implementation - including any piloting processes to assess feasibility, impact, acceptability and any unintended consequences;
- Quantifiable outcomes - relating to changes in models of care, health status or quality of life for individuals or populations, but may also relate to wider outcomes such as satisfaction or experience of people using services, changes in knowledge and changes in behaviour;
- Project evaluation - review process, methods, and outcomes.

Tip: Attach the completed final Quality Improvement or related project report documentation, ensuring evidence of the applicant's leadership role.

Publications

- 4.6.2 An application that claims excellence in relation to publications needs to ensure the following are met:

- Article was published in a peer reviewed publication;
- Evidence that the applicant was a lead or significant author;
- Article is relevant and current to the work and scope of the applicant's organisation, service and/or profession;

Tip: Attach a copy of the publication, clearly identifying the applicant as author, and/or insert an accessible hyperlink to the published article.

Additional qualifications

- 4.6.3 An applicant needs to demonstrate how an additional qualification is both current and relevant to their discipline and/or current workplace, how they have integrated or transferred that knowledge to enhance service performance and accountability, and ensure that their referee validates the relevance and value-add of the qualification.
- 4.6.4 Relevant qualifications to include are those that are additional to the expected mandatory qualification for the position (refer to the Duty statement).
- 4.6.5 Consider the relevance and currency of any additional qualifications. A qualification obtained 15 years ago may no longer have currency either in relation to the applicant's current position or in relation to the knowledge obtained.

Tip: Attach a copy of the qualification and ensure referee validates value and relevance of the qualification.

Education and training

- 4.6.6 Applicants should review their Duty Statement in relation to expectations in their HP3 position regarding education and training. Many duty statements clearly state that participation in, contribution to, responsibility for education, training and professional development, are routine expectations of the position. It is important to reflect on this and consider whether claims can be made to support the applicant performing above expectations.
- 4.6.7 To strengthen a response in relation to education and training an applicant might consider asking themselves:
- Can I provide evidence of identifying gaps in education and training?
 - Can I provide evidence that I have developed a formal in-service program that I have personally led or trained others to lead?
 - Can I provide evidence of a calendar of events, attendance numbers over a significant period of time, attendee evaluations and program revision as a result of evaluation?"

Tip: Provide relevant documentary evidence that supports your claims - e.g. calendar of events, evaluation summary.

Clinical supervision of staff and students

- 4.6.8 Applicants should review their Duty Statement in relation to expectations in their HP3 position regarding supervision. Claims must demonstrate that the applicant performs above the routine expectation.

When reflecting on their achievements in supervision, applicants should consider the scope and extent of their claims, for example occasional supervision of a student or staff member are not on their own evidence of excellence.

Tip: **Example** - Provide evidence that you have taken on the role of coordinating all or most student placements for your team (or staff supervision); that you have promoted and delivered innovative placement and/or supervision models; that you have worked collaboratively with key stakeholders to ensure quality student placements; and that you have evaluated these programs.

Research

- 4.6.9 Evidence of research requires proof of original work and should show how applicants have contributed to research or the evidence/evaluative base for quality or service innovation including:
- Building and fostering staff research capacity and confidence;
 - Leading health systems research into new initiatives;
 - Promoting translation of research into practice to support innovative, safe, sustainable and high-quality practice;
 - Managing funding for research, promoting proactive engagement with strategic research partners;
 - Conducting strategically relevant research and evaluation;
 - Actively presenting research findings, both through publication and presentation.

Tip: Evidence could include a copy of published research, attachment of clinical guidelines or pathways and evidence that clearly highlights the personal contribution of the applicant to achieving the outcome.

4.7 What supporting evidence should NOT be provided?

Emails

- 4.7.1 Applicants are cautioned against attaching emails as evidence unless provided with evidence of consent of the sender and/or copied in parties for its use by the applicant to use in their HP3 application. Emails must not contain any confidential client information.

Screen shots

- 4.7.2 Applicants are cautioned against attaching screen shots of emails, policy documents or website/intranet pages as on their own they have minimal value-add and do not demonstrate how the applicant contributed to the information, rather they just confirm that something happened or that something exists.

Confidential client information

- 4.7.3 Applicants are advised that any application containing supporting documents that identify a client will result in the application not being further considered.
- 4.8.4 Where an application is found to contain inappropriate material, the Panel will take appropriate action which might include referring the matter to an appropriate body and/or disciplinary action.

4.8 Repeat applicants

- 4.8.1 In relation to a repeat application, the Panel may choose to compare the current application with the previous application. Applicants who re-apply are expected to review the feedback provided by the Panel at the time of their unsuccessful application and to prepare a new application taking the feedback into account.

PART 5: SUBMITTING AN APPLICATION

5.1 Closing date

5.1.1 Applications and all supporting documentation (including referee reports) must be received in full by the relevant Scheme Secretariat **by close of business on the closing date**.

5.1.2 Requests for extension may only be considered if the applicant makes the request for extension **prior to the closing date**. Such requests will be considered by the relevant organisation that employs the applicant and may require evidence to support the request.

5.2 Application package

5.2.1 A complete application package must contain the following:

- Completed Application Form with both assessment criteria addressed within the word limit; Responses to each assessment criterion must include progressive numerical referencing of appendices (e.g. Appendix 1, Appendix 2 etc) directly linked to any evidence attached in support of the application; and the same reference number must be recorded on the piece of supporting evidence;
- Supporting documentation - maximum of 20 single-sided A4 pages per criterion. You must clearly label the supporting documentation as numbered appendices (see 5.3.1) and refer to the appendices in your criterion responses.
- A completed applicant declaration signed and dated;
- A completed supervisor statement;
- Two signed and dated Referee Reports, submitted online or on the Referee Report template (Appendix 4 and 5);
- Copy of Payroll letter; and
- Copy of current HP3 Duty Statement.

5.3 Application submission instructions

5.3.1 Applications must be submitted online using the online submission form.

If the online form is not available, the hard copy application form (Appendix 3) may be used. The form must be submitted electronically as a PDF to the Agency Secretariat in compliance with the following instructions:

- Include 'Surname, First name' in footer of the Application Package (Word document).
- Save signed and dated complete Application Package as PDF with file name 'Applicant Surname, Initial – Agency <year>'- (example Smith, J – Health 2020).
- Supporting Documentation saved as PDF with file name 'Applicant Surname, Initial, Criterion X - Attachments 1-20' (example Smith, J Criterion One - Attachments 1-15).

PART 6: THE ASSESSMENT PROCESS

Potential applicants are advised to familiarise themselves with the assessment and application process. The assessment of applications is a detailed, rigorous, and time-consuming process and can take up to three months to finalise from the date applications close.

Tip: Decisions are based on the information provided in an application and the supporting evidence.

6.1 How applications are assessed

6.1.1 All agencies aim to be transparent in their administration of the Scheme and each applicant is assessed on their individual merits; there are no rankings or quotas.

The Scheme is monitored by a Cross-Agency Working Group to ensure that the Scheme is implemented fairly and consistently across all agencies. The Group meets annually prior to the Scheme opening to endorse shared Scheme documents.

6.1.2 A shared online application form, Guidelines, assessment rubrics and referee report templates have been developed for use by all agencies to facilitate a consistent approach.

6.2 Who assesses the applications?

6.2.1 The relevant Agency Scheme Secretariat undertakes an initial screen of each application to check that the application was received by the advertised closing date, that the application package submitted is complete, that the applicant is eligible, and that there are no inappropriate documents attached in support of the application.

Once satisfied that an application can be progressed for formal assessment the Scheme Secretariat notifies the Panel Chair of the total number of applications and the professions represented, and this informs the membership of the Core Assessment Panel.

6.2.2 At this stage the Scheme Secretariat will, as a courtesy, notify relevant senior management and/or Executive of the total number of eligible applicants in the round so that potential budget implications are identified.

6.2.3 A Core Assessment Panel (Panel) is convened for each Agency, comprising the following:

- Chairperson - Agency specific (e.g. Directorate/CPHB) or may be sourced externally if required;
- Agency senior allied health professional(s) or other senior manager(s). Can be sourced externally if required;
- Agency Human Resources representative;
- Agency specific Scheme Secretariat (non-voting).

6.2.4 In addition to the above, each application is also assessed by a senior health professional from the applicant's own profession. In some situations, it may be necessary to source this discipline-specific assessor from another Directorate or external agency to minimise conflicts of interest and/or to source appropriate expertise.

6.2.5 Panel members are selected to avoid conflicts of interest and persons invited to be a panel member must declare any past or present personal or working relationship with any applicant. Any association or potential conflict will be noted and discussed and may result in the non-selection of that panel member.

- 6.2.6 Panel members should be predominantly made up of senior staff from the applicant's Agency although Agencies with small health professional workforces may need to procure members from another Agency to minimise conflict of interest and/or to ensure impartiality;
- 6.2.7 Once a panel member commits to being on the Panel they are expected to attend all meetings convened and to actively participate in the assessment process.

6.3 Privacy and Confidentiality

- 6.3.1 Panel members are required to respect the confidentiality and privacy of all applicants.
- 6.3.2 With the exception of the Panel Chair, panel membership is confidential and will not be disclosed to applicants.

6.4 Assessment Processes

- 6.4.1 To ensure internal consistency, Panel members are required to attend all meetings.
- 6.4.2 Depending on the number of applications received by an Agency, the Panel Chair may allocate each panel member a specific number of applications to assess, rather than all applications, on the understanding that they then present and provide feedback to the core group for further discussion and decision-making.
- 6.4.3 There are no quotas or ranking systems, and each application is assessed on its own merits.
- 6.4.4 Applicants are assessed on their written application, supporting evidence documents and referee reports. The Panel assesses the extent to which the evidence presented meets the benchmark for excellence.
- 6.4.5 The Panel meets as often as is required to ensure that each application is thoroughly reviewed, assessed, discussed and recommendations put to the Panel Chair.
- 6.4.6 All applications are also assessed by a senior health professional that is a subject matter expert in the applicant's field (a 'discipline-specific assessor').
- 6.4.8 The Scheme Secretariat records discussion and decisions made in Panel meetings and the information recorded is used specifically to help inform the Individual Feedback Report that is provided to all unsuccessful applicants at the end of the formal assessment process.
- 6.4.9 A standard assessment rubric is used by all agencies as the basis for assessing each application (see Appendix 1 and 2).
- 6.4.10 To be found successful, an applicant must be found to demonstrate excellence against both assessment criteria. In reaching a recommendation the Panel aims for a consensus approach however where there is not consensus the Panel Chair has the final vote.

6.5 Formalising and endorsing recommendations

- 6.5.1 Once the Panel's determinations have been completed (inclusive of the health profession specific assessment) the Scheme Secretariat will provide formal notification to relevant senior management and/or Executive of the outcome of all applications for employees within their operational area.
- 6.5.2 Communication to senior management and/or Executive should include advice on the number of applicants in the relevant service who applied, the number successful and unsuccessful, and information on the salary advancement arrangements for the successful applicants.
- 6.5.3 The salary advancement is for successful applicants to be advanced from HP3.3 directly to HP3.5, backdated to the first business day after the Panel Chair's final decision regarding outcomes. This date may be different between Agencies due to different meeting dates and time required to

assess applications, however Agencies are obligated to carry out the process as efficiently as possible to ensure equity.

- 6.5.4 Once the relevant senior manager and/or Executive formally signs off the advice, the Scheme Secretariat is then able to notify each applicant of the outcome of their application but should only provide notification when the Individual Feedback Report is ready to be provided as part of the notification process.

Notification process

- 6.5.5 The assessment outcome is confidential. The Individual Feedback Report is to be provided to unsuccessful applicants and should be documented on the agreed proforma. Specific focus in the report is provided to unsuccessful applicants to provide guidance on how they could build a strengthened application in a future round.
- 6.5.6 The Scheme Secretariat is responsible for notifying the relevant Payroll Service of the successful applicants. They should advise full name, AGS number or Calvary employee ID, advancement mechanism e.g. from HP3.3 directly to HP3.5 and the date of effect.

6.6 Appeals

- 6.6.1 Inevitably some applicants will be disappointed with the outcome of their application. The Upgrade Scheme is non-appealable. In some cases, the Panel Chair may agree to correspond and/or meet with an unsuccessful applicant if in the opinion of the Chair it can be demonstrated that this would assist the applicant to better understand how the outcome was reached.
- 6.6.2 If after reading their Individual Feedback Report an applicant is of the view that they need additional advice or feedback to help understand the outcome, the following might be considered reasonable grounds for instigating correspondence with the Panel Chair:
- The applicant is of the view that the relevant Core Assessment Panel did not adequately consider material submitted in support of their application;
 - The applicant perceives discrimination based on, for example, gender, ethnicity or age;
 - The applicant perceives that there was bias or conflict of interest on the part of the Panel / Chair.

6.7 Transferability

- 6.7.1 The HP3 Personal Upgrade is transferable between eligible ACT Public Service Directorates and Calvary Public Hospital Bruce for as long as the awardee is employed at the HP3 level.
- 6.7.2 Where a successful applicant works for two eligible agencies the Upgrade will apply to both employment roles, provided the applicant meets the requirement of 6.7.1 above.

Appendix 1: Criterion One - Organisation Specific Rubric

<p>Applicant name:</p>	<p>Claims do not meet performance expectations of HP3 level and/or insufficient evidence provided / Claims are consistent with performance expectations of HP3 position as per Duty Statement</p>	<p>Claims exceed performance expectations of HP3 work level as per Duty Statement</p>
<p>Panel member name:</p>	<p><i>There is limited evidence to demonstrate how the applicant has enhanced the efficiency and effectiveness of their organisation</i></p> <p>OR</p> <p><i>Evidence demonstrates that the applicant has enhanced the efficiency and effectiveness of their organisation consistent with expectations of their HP3 position.</i></p>	<p><i>Strong evidence that the applicant has enhanced the efficiency and effectiveness of their organisation, at a level that exceeds performance expectations. (Assessors to reference the specific duty the applicant is exceeding performance expectations in)</i></p>
<p>Hover mouse in space below this text and click to bring up drop-down box - select the organisational area that the applicant has addressed in response to Criterion One.</p> <p>The applicant must demonstrate how they have enhanced the efficiency and/or effectiveness of their organisation above the expected level. For full description of each organisational area refer Section 4.3 Guidelines for Applicants, Supervisors and Referees</p>	<p>List responses</p>	<p>List responses</p>
<p>Supporting Evidence</p> <p><i>Relevant</i></p> <p><i>No inappropriate attachments</i></p>	<p>List responses</p>	<p>Confirm evidence is relevant & appropriate</p>
<p>OUTCOME</p>	<p>NOT MET</p>	<p>MET</p>

Appendix 2: Criterion Two - Health Profession Specific Rubric

Applicant name:	Does not meet performance expectations at HP3 level and/or insufficient evidence provided / Meets performance expectations of HP3 work level as per Duty Statement	Exceeds performance expectations of HP3 work level as per Duty Statement
Panel member name:	<i>Limited evidence of the applicant's health profession specific knowledge, skills and/or how that expertise is recognised through a consultancy role utilised by peers and other professionals</i>	<i>Strong evidence that the applicant's knowledge, skills, and expertise are at a level that exceeds that expected of their HP3 position, and that this expertise is recognised and used in a consultancy role by peers and other professionals. (Assessors to reference the specific duty the applicant is exceeding performance expectations in)</i>
Category of health profession expertise claimed by applicant Hover mouse in space below this text and click to bring up drop-down box. Select from list.	<i>OR</i> <i>Evidence demonstrates that the applicant's knowledge, skills and expertise are consistent with that expected of HP3 position. In terms of how this is recognised and utilised by peers and professionals the evidence is consistent with expectations of the HP3 level.</i>	
What evidence is provided to demonstrate the category of health profession specific expertise claimed by the applicant?	List responses	List responses
Recognition of health profession specific knowledge, skills and expertise <i>Is this expertise recognised by peers and other professionals in a consultancy role, and how is it recognised?</i>	List responses	List responses
Supporting Evidence <i>Relevant</i> <i>No inappropriate attachments</i>	List responses	Confirm evidence is relevant & appropriate
OUTCOME	NOT MET	MET

Appendix 3: Application Form - Hard copy version

Note: Only to be used if the online application form is unavailable and to provide guidance on application requirements to prospective applicants.

Application Form

APPLICANT DETAILS			
Preferred title:	Given name:	Surname:	
Email address (to which updates on assessment process can be sent):		Email or postal address (to which you would like your final Assessment Feedback report sent to if different to address for updates):	
Phone Contacts:	Work:	Home:	Mobile:
AGS / Employee number (provided to Shared Services / Payroll to request the pay upgrade if your application to the scheme is successful):			
ELIGIBILITY STATUS			
Are you currently employed at the HP3 Pay Point 3 (HP3.3) level as per the current ACT Public Sector Health Professionals Enterprise Agreement (as at the closing date)? <input type="checkbox"/> Yes <input type="checkbox"/> No (If NO, you are not eligible to apply).			
Have you been employed by the ACT Government and/or Calvary Public Hospital Bruce for a continuous period of 12 months or more? <input type="checkbox"/> Yes <input type="checkbox"/> No (If NO, you are not eligible to apply)			
Are you currently employed by more than one ACT Public Sector Directorate or agency including Calvary Public Hospital Bruce? <input type="checkbox"/> Yes <input type="checkbox"/> No (If YES - please specify both agencies)			
Are you currently subject to an under-performance or misconduct process? <input type="checkbox"/> Yes <input type="checkbox"/> No (If YES please contact your Secretariat)			
POSITION DETAILS			
Position title:		Health Profession:	
Work area:		Division (Canberra Health Services only):	
Directorate/Agency:			
Supervisor/Manager details* Name: Email address:			

*The applicant must send their full application (application form and all supporting evidence) to their supervisor with the supervisor statement template for completion by the closing date. The supervisor is to send their completed supervisor statement direct to the Secretariat with a copy to the applicant.

QUALIFICATIONS

Please list qualifications attained and year conferred

DOCUMENTATION:

Duty Statement

Please attach the Duty Statement/Selection Criteria for your substantive HP3 position. The Duty Statement/Selection Criteria must accurately reflect the current duties performed and/or expected of your position and should not be in draft / unapproved state. Please review your Duty Statement with your supervisor if it does not accurately reflect your current duties/expectations. Allow adequate time for any amendments to be endorsed and a new Duty Statement to be published.

Duty Statement attached

Please attach a letter from Shared Services Payroll and/or Calvary Payroll confirming:

- Your employment at the HP3.3 Pay Point (both positions if employed in more than agency); and
- 12 months continuous service as at closing date;

Letter attached

APPLICANT RESPONSE TO ASSESSMENT CRITERION ONE

CRITERION ONE: ORGANISATIONAL

Select **one** of the following organisational areas **only** to demonstrate how you enhance the efficiency and/or effectiveness of your organisation above the expected level:

- Delivering High Quality Customer Service
- Professional Leadership
- Strengthening Communities
- Improving Performance and Accountability
- Enhancing the Patient/Client/Service User Experience

NOTE: Maximum of 1000 words. Additional words will not be considered.

APPLICANT DETAILS

Preferred
title:

Given name:

Surname:

- Application must be typed.
- Identify how your claims exceed the duties for your HP3 position. Where appropriate, dot points may be used.
- Relevant evidence must be attached to support claims. Up to a maximum of 20 single-sided A4 pages per criterion may be included.
- Clearly label documentation in support of your claims as numbered appendices and refer to the appendices in your application responses.

<Start response here>

Word count:

Referee for this Criterion

Name:

Email address:

NOTE: The applicant must send their response to Criterion 1 and supporting evidence to their referee with the referee report template for completion by the closing date. The referee is to send their completed referee report direct to the Secretariat and a copy to the applicant.

APPLICANT RESPONSE TO ASSESSMENT CRITERION TWO

CRITERION TWO: HEALTH PROFESSION

Extensive specialist and/or generalist knowledge, skills and experience within your health profession, recognised through a consultant role utilised by peers and other professionals.

NOTE: Maximum of 1000 words. Additional words will not be considered.

APPLICANT DETAILS

Preferred title:	Given name:	Family name
Please select <i>one or both</i> options:	<input type="checkbox"/> Generalist <input type="checkbox"/> Specialist <input type="checkbox"/> Both	

- Application must be typed.
- Identify how your claims exceed the duties for your HP3 position. Where appropriate, dot points may be used.
- Relevant evidence must be attached to support claims. Up to a maximum of 20 single-sided A4 pages per criterion may be included.
- Clearly label documentation in support of your claims as numbered appendices and refer to the appendices in your application responses.

<Start response here>

Word count:

Referee for this Criterion

Name:

Email address:

NOTE: The applicant must send their response to Criterion 1 and supporting evidence to their referee with the referee report template for completion by the closing date. The referee must send their completed referee report direct to the Secretariat and a copy to the applicant.

CHECKLIST AND DECLARATION

APPLICANT DETAILS		
Preferred title:	Given name:	Surname
<p>I confirm that I have completed each item below on the checklist:</p> <p><input type="checkbox"/> I have attached an accurate copy of my HP3 position Duty Statement.</p> <p><input type="checkbox"/> I have attached a complete Application Package.</p> <p><input type="checkbox"/> I have attached a letter from Shared Services Payroll and/or Calvary Payroll confirming my employment at HP3.3, and minimum 12 months employment in ACT Government and/or Calvary Health Public Hospital Bruce.</p> <p><input type="checkbox"/> I have attached relevant documentation, my responses to the Assessment Criteria and evidence (not exceeding 20 single-sided A4 pages per criterion) to support my application.</p> <p><input type="checkbox"/> I have provided my completed application (including supporting evidence) and a supervisor statement template to my supervisor/manager to read and complete.</p> <p><input type="checkbox"/> I have provided my completed application (including supporting evidence) and referee report template to my two referees to read and complete.</p>		
<p>APPLICANT DECLARATION</p> <p>I confirm that:</p> <ul style="list-style-type: none">• I have read the current Guidelines• I have attached a complete application with all necessary components detailed above in the checklist.• I confirm that I have not referred to or attached any inappropriate supporting documentation.		
Signature:	Date:	

Appendix 4: Referee Report template - Criterion 1

Note: Only to be used if the online referee report is unavailable and to provide guidance on referee reports to prospective applicants and referees.

Referee Report – Criterion 1

PLEASE NOTE:

The Scheme has an expectation that:

- this Referee Report is informed by the referee’s working relationship with the applicant; and
- the referee is at **HP3 level or above**, has read the [HP3 Upgrade Scheme Guidelines](#) and the applicant’s completed application.

APPLICANT DETAILS

Applicant Given name

Applicant Surname

Applicant Email

REFEREE DETAILS

Referee Name

Position title

Directorate/Agency

this needs to match the Applicant's Directorate/Agency

Contact number

Email address

Relationship to applicant

Length of working relationship (in years and months)

REFEREE REPORT

Please provide your report below, in relation to the applicant’s response to Criterion One. The organisational area of focus chosen by the applicant must be identified below. Your referee response should be framed by outlining how the applicant has enhanced the efficiency and/or effectiveness of their organisation above the expected level, in the organisational area of focus.

Delivering High Quality Customer Service

Professional Leadership

- Strengthening Communities
- Improving Performance and Accountability
- Enhancing the Patient/Client/Service User Experience

Comment (limit of 500 words)

REFEREE STATEMENT

I confirm that I have read the applicant's application for the HP3 Personal Upgrade Scheme for the Recognition of Excellence and that I have also read the current [HP3 Upgrade Scheme Guidelines](#). As the referee, I can confirm that the claims made by the applicant in relation to Criterion One reflect a level of work beyond that expected in their HP3 role and that the claims are true and accurate.

Please send your completed referee report to the Scheme Secretariat from the Applicant's Directorate or agency. See <https://health.act.gov.au/careers/allied-health/learning-and-professional-development/health-professional-level-3-personal> for the contact list.

Appendix 5: Referee Report template - Criterion 2

Note: Only to be used if the online referee report is unavailable and to provide guidance on referee reports to prospective applicants and referees.

Referee Report – Criterion 2

PLEASE NOTE:

The Scheme has an expectation that:

- this Referee Report is informed by the referee’s working relationship with the applicant; and
- the referee is at **HP3 level or above**, has read the [HP3 Upgrade Scheme Guidelines](#) and the applicant’s completed application.

APPLICANT DETAILS

Applicant Given name

Applicant Surname

Applicant Email

REFEREE DETAILS

Referee Name

Position title

Directorate/Agency

this needs to match the Applicant's Directorate/Agency

Contact number

Email address

Relationship to applicant

Length of working relationship (in years and months)

REFEREE REPORT

Please provide your report below, in relation to the applicant's response to Criterion Two. Please select the area of focus chosen by the applicant below. Your referee response should be framed by outlining the extensive specialist and/or generalist knowledge, skills and experience of the applicant within their health profession, recognised through a consultancy role utilised by peers and other professionals.*

Please select one or both options

- Generalist
- Specialist

Comment (limit of 500 words)

REFEREE STATEMENT

I confirm that I have read the applicant's application for the HP3 Personal Upgrade Scheme for the Recognition of Excellence and that I have also read the **HP3 Upgrade Scheme Guidelines**. As the referee, I can confirm that the claims made by the applicant in relation to Criterion Two reflect a level of work beyond that expected in their HP3 role and that the claims are true and accurate.

Please send your completed referee report to the Scheme Secretariat from the Applicant's Directorate or agency. See <https://health.act.gov.au/careers/allied-health/learning-and-professional-development/health-professional-level-3-personal>



ACT
Government

ACT Health Directorate

Canberra Health Services

Community Services Directorate

Education Directorate

Justice and Community Safety Directorate

In partnership with Calvary Public Hospital Bruce