



# Human Resources Management Policy and Procedure

## **Purpose**

1. This Policy provides a framework for the key human resources processes for the recruitment, management and support of staff at the Australian International Institute of Higher Education ('the Institute').

## **Scope**

2. This Policy applies to:
  - a) all staff of the Institute whether full-time, part-time, casual or contract
  - b) members of the Institute's Governing Bodies
  - c) individuals engaged in providing services to the Institute, such as contractors or consultants
  - d) key human resource management processes.
3. The following policies and documents should be read in conjunction with this Policy:
  - a) *Equivalence of Academic Staff Qualifications Policy and Procedure*
  - b) *Sexual Assault and Sexual Harassment Prevention Policy and Procedure*
  - c) *Staff Academic Integrity Policy*
  - d) *Staff Code of Conduct*
  - e) *Staff Scholarly Activity Policy*.

## **Definitions**

4. For the purposes of this Policy:
  - a) **Performance Goals** are objectives set with staff at the Institute for specific duties or tasks in the current job position that are aligned with the Institute's overall goals and assist staff in understanding what is expected of them.
  - b) **Promotion Panel** is an appropriately qualified and diverse group of people within the Institute that assess staff applications for promotions.
  - c) **Performance Review** is an assessment of a staff member's performance undertaken over a period of time to determine the degree to which agreed objectives and expectations have been reached.
  - d) **Selection Panel** is a group of people within the Institute responsible for assessing applications for vacancies at the Institute and recommending the preferred candidate to fill a position to the Chief Executive Officer for approval.
  - e) **Selection Criteria** is a list of essential and desirable skills, attributes, qualification/s and experience which is necessary for an applicant to possess to be successful in the position.
  - f) **Staff Development Program** is a plan detailing the professional development activities that staff will undertake with the financial and non-financial support from the Institute. The activities may include enrolling in a course and attending, or presenting at conferences, seminars and workshops that are directly relevant to their position/role at the Institute.



- g) **Staff File** is the file that contains all information related to a particular staff member and/or additional/academic documents that might be relevant to the selection, employment and professional development of a staff member.
- h) **Staff Grievance** is a complaint from a staff member concerning a work-related matter that was unfair, discriminatory or offensive.
- i) **Successful Candidates** are the applicants who successfully and competitively demonstrate that they meet each of the selection criteria for a specific position.

## Policy

### Principles

5. The Institute ensures the following in its approach to the recruitment, support and management of staff:
  - a) all human resources management practices support the Institute's key objectives of scholarly, academic and operational excellence
  - b) recruitment and selection of staff is based on merit
  - c) efforts are made to attract applicants from suitably diverse cultural backgrounds and to seek an appropriate gender balance in the Institute workforce
  - d) staff are appropriately qualified and experienced in accordance with the requirements of the *Higher Education Standards Framework* and the responsibilities of their roles
  - e) relevant information about the Institute and its obligations under the *Education Services for Overseas Students Act 2000 (ESOS Act 2000)* and the associated *National Code*, the *Higher Education Standards Framework*, and other legislation and Institute policies are communicated and understood by new and existing staff
  - f) all staff have fair access to benefits and services in an equitable manner, including assistance to reasonably accommodate a person's disability
  - g) all staff have professional development opportunities appropriate to their role
  - h) staff performance is monitored as part of regular review and feedback is provided to enable continuous improvement
  - i) staff have a thorough understanding of the *Staff Code of Conduct*, and any alleged breaches are investigated and responded to fairly in accordance with this Policy and relevant industrial agreements
  - j) staff have access to appropriate, fair and transparent grievance mechanisms.

## Procedures

### Authority and responsibility

6. The Chief Executive Officer (CEO) is ultimately responsible to the Governing Council for the oversight of the Institute's human resource management matters.
7. The CEO is responsible for the management of all human resource matters for professional staff and for the Academic Dean and may delegate appropriate functions to human resource management staff.
8. The CEO delegates responsibility for all human resource matters for academic staff to the Academic Dean.



## Standards of conduct

9. The Institute promotes a working and learning environment that is fair for all and based on the principles of equity and respect for social and cultural diversity. Academic freedom and freedom of speech are upheld, and unlawful discrimination, bullying, harassment, vilification and victimisation are not tolerated. These values are promoted and operationalised through all Institute governance frameworks and practices, teaching and learning, operations and through the following policies:
  - a) *Academic Freedom Policy*
  - b) *Student Equity and Diversity Policy and Procedure*
  - c) *Student Disability Policy and Procedure*
  - d) *Staff Code of Conduct*
  - e) *Student Sexual Assault and Sexual Harassment Prevention Policy and Procedure*
  - f) *Public Information and Representation Policy and Procedure.*

## Staff Code of Conduct

10. The *Staff Code of Conduct* outlines the expected standards of behaviour of staff at the Institute.
11. Where a staff member suspects a breach of the Code may have occurred, they may seek advice from their supervisor or a senior manager, or lodge a grievance where appropriate.
12. A staff member whose conduct falls below the standards outlined in the Code will be dealt with in accordance with this Policy and the relevant industrial agreement where necessary. Academic misconduct is separate and managed through the *Staff Academic Integrity Policy*.
13. Unsatisfactory performance is separate to misconduct and is dealt with in the section on Performance Planning and Review in this Policy.

## Recruitment process for ongoing staff

14. To fill an ongoing position, the Institute follows a four-stage recruitment and selection process:
  - a) prepare and advertise
  - b) applications and shortlisting
  - c) selection
  - d) appointment.

## Prepare and advertise

15. The Institute may have to fill a vacancy due to staff turnover or changes to the Institute (e.g. as the Institute grows).
16. The CEO must approve the filling of all positions, whether the position is a new or replacement position.
17. All positions must have an up-to-date position description, including a statement of duties and selection criteria.
18. To engage staff with academic oversight and/or teaching responsibilities, the position description must include, as a minimum, the following selection criteria:
  - a) knowledge of contemporary developments in the discipline, as demonstrated by evidence of continuing scholarship, research or advances in practice
  - b) skills in contemporary teaching, learning and assessment principles relevant to the discipline and the role



- c) a Masters qualification, at a minimum, in the discipline, a doctorate qualification in the discipline will be looked upon favourably
  - d) applicants without a Masters qualification must be able to demonstrate experience equivalent to a Masters, as outlined in the *Equivalence of Academic Staff Qualifications Policy*.
19. All ongoing positions to be filled are advertised, including on the Institute's website, to attract an adequate pool of the most qualified persons from which the Institute can shortlist and select.

### ***Applications and shortlisting***

20. The Institute will acknowledge receipt of job applications and will advise unsuccessful candidates as soon as a shortlist of candidates has been decided.
21. Duly constituted Selection Panels will assess applicants against established selection criteria to ensure objectivity and avoid bias in all stages of the selection process
22. A Selection Panel must have a minimum of three staff members and must include:
- a) for the recruitment of the Academic Dean, the Chairs of the Academic Board and the Governing Council, and the CEO
  - b) for the recruitment of Course Coordinators, the Academic Dean, the CEO and an independent member of the Academic Board
  - c) for the recruitment of academic staff, the Academic Dean, the relevant Course Coordinator and another Course Coordinator
  - d) for the recruitment of the Student Services Manager, the CEO, the Academic Dean and an independent member of the Governing Council
  - e) for the recruitment of professional staff, the CEO, an independent member of the Governing Council and the Student Services Manager.
23. The Chair of the Selection Panel and one other Panel member will conduct an initial shortlisting of applicants after considering all applications.
24. Written referee reports will be sought for candidates short-listed for all positions.
25. Recruitment and selection agencies should only be engaged, with the approval of the CEO when:
- a) the Institute's advertising and shortlisting procedure fail to produce an acceptable shortlist of candidates, or
  - b) for senior roles or specialised roles that are expected to be difficult to fill through normal advertising within the allocated budget/requirement.

### ***Selection***

26. Interviewing shortlisted candidates is an essential element of the selection process.
27. Interviews may be conducted in person, via telephone or video conference, or another online medium (e.g. Zoom).
28. The Selection Panel must compile a list of interview questions related to the Position Description and the Selection Criteria.
29. In addition to the interview, the Panel may consider other forms of selecting the appropriate candidate. These other forms may include seminars (for academic appointments), or skill assessment tests.
30. When interviews with all shortlisted candidates have concluded:
- a) the Selection Panel must agree on the successful candidate



- b) where more than one candidate is considered appointable, the Selection Panel must rank the candidates in order of preference
  - c) the Chair of the Selection Panel must prepare a report explaining how the successful candidate meets the Selection Criteria in the position description, including a statement of equivalency where required for any candidates for academic positions
  - d) the Chair, or a delegate, is responsible for advising unsuccessful candidates.
31. Telephone reference checks must be conducted, as a minimum whenever possible with the preferred candidate's supplied list of referees. Reference checks should be conducted on a confidential basis.
32. All overseas qualifications of potential candidates that are relevant for the designated position must be assessed for their equivalence to Australian qualifications with reference to the [Department of Education's Qualifications Recognition Policy](#), or the [National Academic Recognition Information Centres \(NARIC\) database](#).

### **Appointment**

33. The CEO must approve a recommendation for appointment by a Selection Panel before an offer of appointment can be made.
34. For an existing or former staff member, the Academic Dean or a nominee is to check the candidate's staff records and must be satisfied there is no impediment to the person taking up the appointment that might not have been known to the Selection Panel.
35. Unsuccessful short-listed candidates should be advised about the outcome of the selection process. They may be advised by telephone in the first instance and in any event should receive written notification. They should be informed that they may seek oral feedback from the Chair of the Selection Panel, if they choose to do so.
36. The successful candidate will receive a written contract of employment. To accept the employment offer, the candidate must sign and return the original contract.
37. The new staff must undergo a probationary period relevant to their type and level of appointment.
38. Any concerns about the recruitment and selection process should be referred in the first instance to the Chair of the Selection Panel.
39. There is no appeal process against decisions made by duly constituted Selection Panels concerning the recruitment and appointment of staff. The Selection Panels have discretion in the relative weighting of selection criteria, the judgement on the merits of candidates against those criteria and in the assessment of potential or ability to perform other duties.
40. Certified copies of the highest relevant qualifications claimed by the successful candidates must be sighted. The staff member sighting the documents must make copies of sighted documents, have them certified and place a copy on the staff file.

### **Recruitment process for casual staff**

41. Casual staff are recruited to cover ad hoc and/or short- to medium-term vacancies, where a clear need for the work to be completed has been established, for example, to address temporary peak in workloads or to cover short-term staff absences.
42. To engage casual staff, approval from the CEO must be obtained.
43. The relevant staff member requesting approval to engage casual staff must provide:
- a) justification for the engagement



- b) duties, classification and period of the engagement
  - c) relevant skills, knowledge, experience and qualifications required.
44. If the engagement of casual staff is approved, an open and merit-based process should be followed, similar to that for the recruitment of ongoing staff.

### Induction

45. New staff (ongoing or casual) will be required to attend an induction program, which is designed to welcome new staff to the Institute and to familiarise new staff with:
- a) the higher education framework under which the Institute operates. This includes the education services for overseas students (ESOS) framework
  - b) work health and safety requirements
  - c) the Institute's IT systems and software
  - d) the Institute's policy framework, including academic integrity requirements and the *Staff Code of Conduct*
  - e) their entitlements to professional development and performance feedback.
46. New staff must sign an Induction Program Checklist to indicate they have completed the induction program, which their supervisor will verify has been undertaken and which will then be placed on the staff's personal file.
47. New staff must endeavour to complete the induction program within 14 days of commencing employment at the Institute.

### Performance planning and review

48. All staff are required to participate in the relevant performance planning and review process appropriate to their employment classification.
49. A supervisor will meet at least annually with each staff member who reports to them to discuss individual performance goals, work plans and individual professional development plans.
50. Performance reviews of academic staff, including casual staff, will include a review of student feedback (where teaching) and scholarly activities.
51. The annual performance review process is conducted as per the following three-stage process:
- a) **Goal setting:** in consultation with their supervisor, and having regard to the Institute's strategic goals and the staff member's position description, each staff must set proposed performance objectives, associated metrics, and a development plan (including planned scholarly activities for academic staff) for the year.
  - b) **Annual progress feedback and review:** each staff member meets with their supervisor to discuss their performance over the year, including initial and revised objectives, and agrees on new and adjusted objectives and any required corrective action. The supervisor will provide constructive feedback collated from a variety of sources, including student and peer feedback as applicable.
52. Supervisors will document the performance review process, including a record of the three-stage process.
53. Supervisors are also expected to hold regular discussions with employees on their performance and ensure that performance issues are resolved as they arise where appropriate.





### **Performance issues**

54. Ongoing performance issues will be managed by the supervisor and reported to the Academic Dean for academic teaching staff or the CEO for professional staff.
55. Underperformance will be managed as per the following five-stage process:
- a) **Issue identification and assessment:** the supervisor will identify the exact performance issue and, where possible, its cause. Appendix 1 provides an outline of common performance issues. The supervisor will determine the seriousness and extent of the issue, and the gap between what is expected and what is being delivered.
  - b) **Meeting:** the supervisor will organise a meeting with the staff member to discuss the issue. The staff member will be made aware of the purpose of the meeting in advance to allow for adequate preparation and advised that they are allowed to bring a support person to the meeting. At the meeting, the supervisor will clearly explain what the issue is, its impact on the business, and what is expected from the meeting.
  - c) **Solution:** The supervisor and the staff member will agree on an action plan, including, as appropriate, performance standards and expectations, timeframes, roles and responsibilities, and required development and support. A date will be set for another meeting to review progress.
  - d) **Monitoring:** the supervisor monitors the staff member's performance and provides regular, constructive feedback.
  - e) **Closing:** the supervisor organises a meeting with the staff member to review progress in order to formally close the performance management process.
56. In the event of continued underperformance, the supervisor will escalate the matter to the Academic Dean, for academic teaching staff, or the CEO for professional staff who will implement unsatisfactory performance provisions in accordance with the relevant industrial agreement.
57. Supervisors are responsible for documenting the performance management process, including a record of the five-stage process.

### **Professional development**

58. The Institute will identify organisational and professional development goals and priorities and develop and implement a range of strategies and programs to enhance and build the capacity, skills and professionalism of staff to enable them to contribute to the Institute's strategic directions.
59. The Institute is committed to:
- a) ensuring staff maintain their knowledge of regulatory developments in the higher education sector, including the ESOS framework, through workshops
  - b) providing staff with the opportunity to develop skills, knowledge and attributes that complement organisational and operational goals
  - c) providing staff with the opportunity to participate in career development activities that extend and enhance their capabilities and capacity for advancement within the Institute
  - d) acknowledging the concept of Continuing Professional Development (CPD) to support and encourage opportunities for continuous learning within the Institute
  - e) ensuring equity of access to professional development programs and resources and support for particular groups and individuals where indicated
  - f) recognising that responsibility for professional development is shared between staff and



- supervisors for the planning and undertaking of professional development relevant to their roles and responsibilities
- g) ensuring the provision of mandatory programs to cover the core requirements of staff roles and responsibilities
  - h) using performance review and planning processes as the primary means of ensuring alignment between individual, unit, and organisational plans and priorities and identifying individual and work unit learning and development needs of staff
  - i) engaging in planning, development and continuous improvement of internal professional development programs.
60. Staff members and their supervisors should consider a range of professional development activities that enhance organisational and individual development and capabilities. Academic staff must also ensure that they are meeting the requirements of the *Staff Scholarly Activity Policy*.
61. The Institute will support formal and informal activities, processes and programs including:
- a) allocation of funding for professional development in all unit budgets and centrally funded internal professional development providers
  - b) provision of opportunities for career development within the Institute through internal vacancies or the temporary appointment of employees to a higher classified position
  - c) support for attendance at internal and/or external professional development courses and conferences.
62. Individual professional development plans will be developed and reviewed as part of the Institute's Performance, Planning and Review process for staff.
63. Staff members, with the support of their supervisor and senior management, will actively implement their individual development plans and summarise the progress and outcomes of the plan at the annual planning and review meeting.
64. Supervisors have a responsibility to ensure the effective planning, support, monitoring and implementation of individual professional development plans. The Academic Dean or CEO, as part of the performance, planning and review process, must approve and support agreed individual development plans in line with the Institute's plans and budgets.

### **Academic staff promotions**

65. Academic promotion is based upon commendable performance in the areas of Teaching, Learning and Scholarship. Promotion Panels will assess an applicant's contribution to these areas by reviewing the standard of performance and the quality and impact of the applicant's work.
66. The Institute will call for applications for promotion on an annual basis.
67. Applicants will apply for promotion using the *Application for Promotion Form*. Applicants will provide a brief narrative on their major contribution/s across the areas of Teaching, Learning and Scholarship since their appointment or last promotion, whichever is applicable. Applicants will summarise their narrative in quantitative terms by distribution of percentage weightings across the criteria. An applicant must provide sufficient evidence for the Promotion Panel to assess whether the applicant meets the standard of performance required for the level of promotion sought.





## **Promotion criteria**

### **Teaching and Learning**

68. Those making an application that relies significantly on this criterion would normally be engaged in the practice of teaching at the time of making their application. This criterion requires evidence of sustained and excellent performance in student outcomes, student feedback and extensive teaching experience in a range of settings. Evidence under this criterion may include, but is not limited to:
- a) performance on graduate outcomes, student satisfaction, retention, progression and graduation rate measures
  - b) industry feedback on graduate skills and course content linked to teaching
  - c) innovations that meet the learning needs of students with diverse backgrounds
  - d) sector collaboration on Teaching and Learning innovations and evidence of implementation and impact
  - e) peer-reviewed course material, curriculum, assessment and teaching practice innovations and developments (including exams, websites, videos, course guides, teaching notes, student feedback, etc.)
  - f) professional practice to ensure skills' currency and relevance with Teaching and Learning
  - g) coordination of a significant aspect of a course or a significant contribution to the development or coordination of teaching at the Institute
  - h) community and industry engagement activities that contribute to core activities of teaching and scholarship
  - i) mentoring or supervising teaching staff
  - j) innovations in teaching, unit or course innovation, design and/or coordination which have influenced others.

### **Scholarship**

69. Applicants for promotion on the basis of this criterion must be able to demonstrate scholarly achievements that make a contribution to the enhancement of teaching and learning within the discipline range of the Institute as well as the development of new discipline-based knowledge.
70. Scholarly activity is defined as 'those activities concerned with gaining new or improved understanding, appreciation and insights into a field of knowledge, and engaging with and keeping up to date with advances in the field. This includes advances in ways of teaching and learning in the field and advances in professional practice, as well as advances in disciplinary knowledge through original research.'<sup>1</sup> Scholarly activities are covered in more detail in the Institute's *Staff Scholarly Activity Policy*.
71. In applications for promotion applicants should provide evidence of the quality and impact of their scholarship. This may be demonstrated through publications, citations, industry adoption and applications, patents, awards, grants, fellowships and such measures.

### **Standards of performance**

72. Applicants must, as a minimum, meet the base skill requirements applicable and described in the relevant Position Description. In addition, applicants for promotion will normally have advanced qualifications, in which case a doctoral qualification or equivalent professional

<sup>1</sup> TEQSA Guidance Note, *Scholarship*, Version 3.0



qualifications appropriate to the field is usually required (see *Equivalence of Academic Staff Qualifications Policy*).

### **Grievance principles and procedures**

73. All staff at the Institute are entitled to a fair and respectful work environment. During the course of their employment, staff may have grievances that the Institute aims to resolve in accordance with these provisions.

#### ***Principles for managing grievances***

74. The Institute will manage all staff grievances in accordance with the National Employment Standards of the *Fair Work Act 2009*.
75. The Institute will investigate all allegations and provide a response to the staff member who lodged the grievance.
76. The Institute aims to ensure that:
- a) grievances are addressed sensitively, promptly and in accordance with relevant Institute policy and the principles of natural justice
  - b) all reasonable steps are taken to respect the confidentiality of the people involved in a grievance
  - c) all parties to a grievance are treated with fairness and impartiality and all grievances are viewed as allegations until they have been properly investigated and a determination made
  - d) appropriate records are maintained throughout the resolution process
  - e) persons who lodge grievances are protected from victimisation or reprisal
  - f) persons who lodge grievances are regularly informed of the progress of the matter
  - g) all parties to a grievance will be advised whether the grievance is substantiated or not substantiated, of any actions that are to be taken as a consequence and of their right to appeal.

### ***Grievance management procedures***

#### **Informal resolution options**

77. A staff member who has a concern about any work-related issue has the following informal options available to them:
- a) speak directly to the person causing, or responsible for, the problem and inform them that their behaviour was unfair, offensive or discriminatory, and the grounds for this
  - b) speak to their immediate supervisor or, if that is not appropriate, a senior manager about their grievance.

#### **Formal grievances**

78. If the matter remains unresolved after informal steps the staff member or supervisor should submit a formal grievance in writing to the CEO.
79. The CEO will appoint a Responsible Officer to investigate the matter. Depending on the identity of the staff member with the grievance the Responsible Officer may be:
- a) the Academic Dean
  - b) the Student Services Manager
  - c) an independent member of either the Academic Board or the Governing Council.



80. The Responsible Officer will:
- a) investigate the matter, provide opportunities for any involved parties to make a submission and determine whether the grievance is substantiated
  - b) make a relevant recommendation about the grievance consistent with the Institute policy
  - c) submit a report and recommendations for action to the CEO.
81. Recommendations may include:
- a) mediation between relevant parties where appropriate
  - b) counselling of the staff member involved on their reported behaviour and the findings made as a result of the investigation
  - c) disciplinary action in accordance with the relevant staff employment agreement
  - d) some other form of appropriate action; or
  - e) no further action.
82. The CEO will consider the recommendations and may:
- a) confirm the actions
  - b) vary the actions
  - c) set the action aside and substitute a new action.
83. The CEO will notify the outcome of the grievance to all parties, and their supervisors where appropriate, including the right to appeal.
84. Should a complex grievance not be resolved within 20 working days a formal written progress report will be provided to the staff member who lodged the grievance within this timeframe.
85. Staff may seek the assistance of the Fair Work Ombudsman throughout this process.
86. The CEO will ensure that all records of grievances are maintained in accordance with the *Records Management Policy*.
87. The CEO will submit de-identified reports of grievance investigations and outcomes to the Governing Council with recommendations in relation to any systemic issues.
88. If a grievance concerns the CEO the grievance should be submitted in writing to the Chair of the Governing Council who will determine the appropriate course of action in accordance with this Policy.

#### **Confidentiality and non-victimisation**

89. The parties to a grievance are required at all stages of a grievance to maintain confidentiality in relation to the concern or complaint. The parties must not disclose, by any form of communication, either the fact or the substance of the matter to anyone other than staff charged with responsibilities under this Policy, a qualified counsellor or a relevant external authority.
90. A person must not victimise or otherwise subject another person to detrimental action as a consequence of that person raising, providing information about, or otherwise being involved in the resolution of a grievance under these procedures.
91. Any breach of either the confidentiality or non-victimisation requirements will be treated seriously by the Institute and may result in disciplinary action. Any such breach will be referred to the CEO for investigation and handling.



## Misconduct

92. Where a supervisor or manager has concerns about a staff member's conduct a disciplinary interview will be conducted to provide an opportunity to discuss the issues of concern.
93. The staff member will have the right to be supported by a person of their choosing and will have the right to respond to the allegations of misconduct put to them. This meeting will be witnessed, confirmed in writing and acknowledged by the staff member concerned.
94. The warnings procedure will normally include a series of verbal, written and witnessed warnings that set out to the staff member who is being warned, the basis of the warning and the ways that the staff member can and must improve their behaviour. It must also identify what action or actions will occur if there is no improvement within the time frames set down. Such actions could include termination of employment.
95. Cases of serious and wilful breaches of the *Staff Code of Conduct* can result in instant dismissal.

## Appeals

### ***Appeal against grievance outcomes***

96. If the outcome of a grievance is not accepted by any party to the grievance, they may seek the services of an external mediator by referring to the Queensland Industrial Relations Commission or other relevant statutory authority.
97. Staff members who remain dissatisfied with the outcome of any grievance processes may also lodge an external appeal as outlined below.

### ***Appeals against other decisions made under this Policy***

98. A staff member may appeal against a decision made under this Policy. The grounds for appeal are that the decision is inconsistent with this Policy.
99. Appeals must be made in writing and lodged with the CEO within five (5) working days of the staff receiving written notification of the decision. Where the CEO has been involved with the original decision appeals must be submitted to the Chair of the Governing Council.
100. The CEO/Chair will undertake whatever enquiries they deem necessary to investigate the matter, including consulting with the staff member lodging the appeal and the original decision maker.
101. The CEO/Chair will confirm or vary the decision and respond in writing to the appeal within ten (10) working days.
102. All decisions made by the CEO/Chair in relation to appeals will be reported to the Academic Board and/or the Governing Council as appropriate, with due consideration of requirements for confidentiality.

### ***External appeals***

103. If a staff member remains dissatisfied with the outcome of their grievance or appeals they have the right to lodge an external appeal with:
  - a) the Independent Tertiary Education Council Australia (ITECA)
  - b) the Australian Human Rights Commission for matters relating to discrimination and breaches of human rights
  - c) the Fair Work Commission for matters relating to their employment contract and conditions.



## Associated information

<b>Approving body</b>	Governing Council
<b>Date approved</b>	23 October 2020
<b>Date of effect</b>	Commencement of operation
<b>Scheduled review</b>	Two years from when policy commences
<b>Current version approval date</b>	30/05/2024
<b>Next review date</b>	30/05/2026
<b>Policy owner</b>	Chief Executive Officer
<b>Policy contact</b>	Chief Executive Officer
<b>Related AIIHE Documents</b>	Equivalence of Academic Staff Qualifications Policy and Procedure Sexual Assault and Sexual Harassment Prevention Policy and Procedure Staff Academic Integrity Policy and Procedure Staff Scholarly Activity Policy and Procedure Staff Code of Conduct
<b>Higher Education Standards Framework (Threshold Standards) 2021 (Cth)</b>	B1.1 "Institute of Higher Education" category Section 3.2
<b>Other related external instruments/documents</b>	<b>Related Legislation</b> <ul style="list-style-type: none"><li>• Tertiary Education Quality and Standards Agency Act 2011 (Cth)</li><li>• Anti-Discrimination Act 1977 (Cth)</li><li>• Copyright Act 1968 (Cth)</li><li>• Fair Work Act 2009 (Cth)</li><li>• Ombudsman Act 1976 (Cth)</li><li>• Privacy and Personal Information Protection Act 1998 (Cth)</li><li>• Racial Discrimination Act 1975</li><li>• Workplace Gender Equality Act 2012 (Cth)</li><li>• Higher Education Industry—Academic Staff—Award 2010</li><li>• Higher Education Industry—General Staff—Award 2010</li></ul> <b>Good Practice Documents</b> <ul style="list-style-type: none"><li>• FairWork Ombudsman: Best Practice Guide - Managing underperformance</li></ul>

## Document history

Version	Author	Changes	Approval Date
1.0	Not applicable	Original version	23 October 2020
1.1	Compliance Officer	Business name added, footer information updated	December 2022
1.2	Compliance Officer	Reviewed to align with the HESF 2021 and the footer was updated with current addresses.	30 May 2024

*N.B. The document is uncontrolled when printed! The current version of this document is maintained on the AIIHE website at [www.aiihe.edu.au](http://www.aiihe.edu.au).*



## ***Appendix 1 – Common Performance Issues (adapted from Fair Work Ombudsman: Best Practice Guide - Managing Underperformance)***

Issue	Possible causes	Actions
Employee does not undertake work as required, showing signs of apathy and laziness  Employee does not appear to understand job requirements or directions	<ul style="list-style-type: none"><li>• Job content &amp; design</li><li>• Inappropriate job fit</li><li>• Personal or external issues</li></ul>	<ul style="list-style-type: none"><li>• Begin with an informal performance discussion</li><li>• Be clear about the performance requirements and expected contribution of the role to the Institute</li><li>• Focus on interest in work tasks, and how they might be improved</li><li>• Explore options for opportunities in other areas of the Institute, if possible</li><li>• Refer to counselling service if personal circumstances are impacting performance</li></ul>
Employee will not follow directions or perform tasks as required	<ul style="list-style-type: none"><li>• Failure to understand what is required</li><li>• Inability to perform tasks</li><li>• Personal issues</li></ul>	<ul style="list-style-type: none"><li>• Begin the performance improvement process starting with informal discussions around what is required in the position</li><li>• Look at possible options for training and development if a skill deficit is identified</li><li>• Commence formal performance management process if no improvement is forthcoming</li></ul>
Employee fails to acknowledge they are underperforming	<ul style="list-style-type: none"><li>• Performance issues have not been adequately explained</li><li>• Process has not been adequately applied</li><li>• Employee does not accept supervisor assessments</li></ul>	<ul style="list-style-type: none"><li>• Re-establish expected outcomes, use evidence of how performance has failed to meet expected standards, explain the impact of this on the success of the business</li><li>• If necessary commence a formal performance management process</li></ul>





Issue	Possible causes	Actions
Employee does not complete work tasks to the required standard	<ul style="list-style-type: none"><li>Lacks the required skills and capabilities</li></ul>	<ul style="list-style-type: none"><li>Identify training and development opportunities as part of the performance improvement plan</li><li>If an employee fails to develop the required skills, progress through the performance management process to possible options such as reassignment of duties, or transfer to another area to achieve a better job fit where possible</li><li>Review recruitment practices to ensure appropriate selection decisions are being made</li></ul>